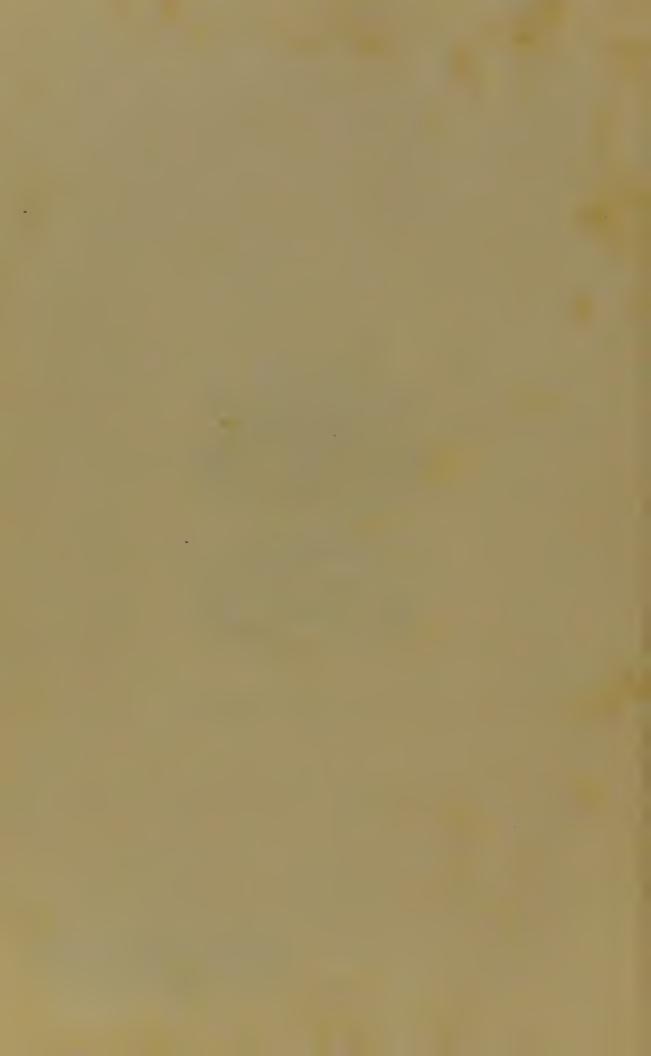




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WHOM TO CONSULT?

A Book of Reference for Envalids,

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WHOM TO CONSULT;

OR,

A Book of Reference for Invalids,

IN

DISORDERED HEALTH, DIFFICULT CASES, OR LONG-STANDING DISEASE.

INCLUDING A

SIMPLE NOSOLOGICAL ARRANGEMENT OF THE MEDICAL AND SURGICAL FORMS OF DISEASE

(SUITED FOR EASY REFERENCE).

TOORTHER WITH

A LIST OF THE MOST DISTINGUISHED PHYSICIANS AND SURGEONS
OF THE DAY; AN EXPLANATORY GLOSSARY OF
PATHOLOGICAL TERMS, ETC. ETC.

Second Edition.

LONDON:

AYLOTT AND SON, 8, PATERNOSTER ROW.

1865.

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THE PUBLISHERS' ADDRESS.

The origin of this long-wanted Work may soon be told. For many years past, as Publishers of Medical literature in many shapes, we have been in the habit of having the question put to us by anxious invalids, labouring under various forms of ill-health, as to "Who they should Consult?"—by no means an unusual interrogation, though a very natural and common-sense question to the parties concerned, and often a vital one.

From common civility, to say nothing of the motives of humanity, we have endeavoured to answer these queries, not on our own responsibility so much as by the kind aid of some of our Medical patrons, competent to form an opinion on such matters, or to select, from among the several eminent *Medical* or *Surgical* authorities of this Metropolis, some one most suited to the case. That we have done so in many cases *successfully*, we feel assured; and this has led us

to believe, that something more efficient, (after the fashion of this manual,) and calculated to extend its usefulness beyond our limited sphere, might not only do still more good, but, at the same time, save a vast deal of trouble, and serve the purpose much better.

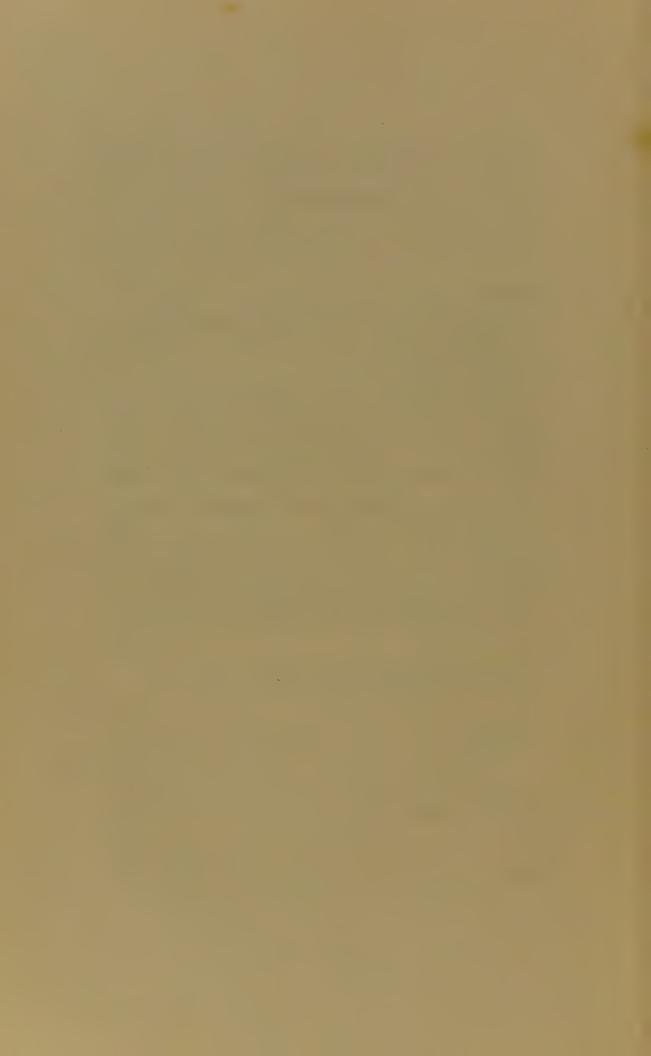
Struck with this idea, we sought the assistance of a highly distinguished member of the Medical Profession, well qualified, as will be seen, to carry out our views, and one to whom the claims of his Professional brethren are well known. To this gentleman we are indebted for the useful information to be found in these pages, which he agreed to pen, and we to publish, and hence the origin of the Work. Convinced, as we are, of its practical utility to thousands now in search of such a guide, and that it may save many a vast amount of mischief and human suffering (to say nothing of expense), if not sometimes serious and fatal consequences, we leave our book to make its own way.

THE PUBLISHERS.

Paternoster Row; 1863.

CONTENTS.

	Page
Preface	v
Introductory Remarks on the Proper Choice of a Medical Attendant	1
Professional Distinctions	8
Professional Titles and Qualifications	13
Fees	19
The Over-Drugging System:—"A Doctor's Bill"	24
THE PATHOLOGY, DIAGNOSIS, AND DISTINCTIONS OF DISEASE; CLASSIFICATION, &c	27
Nosological Table of Medical and Surgical Cases	33
Specialities, and Medical and Surgical Authorities for Consultation in Particular Cases	53
Index of Diseases	55
LISTS OF EMINENT MEDICAL AND SURGICAL AUTHORITIES FOR CONSULTATION:—	
Physicians	71
Obstetric Practitioners, Physician-Accoucheurs, &c. Consulting Surgeons	84 86
Dental Practitioners	94
Glossary	95
INDEX	107



PREFACE.

In presenting the following pages to the Public, I have little to say by way of Introduction, and perhaps, so long as "self-preservation forms the first law of nature," far less by way of apology; the end in view being an ample plea in itself for bringing the subject under the Reader's notice. I have abundant reason to know, that such a guide may in many instances prove of infinite service in putting people on the right track in regard to the most proper Medical or Surgical advice in any particular case, and that the work is destined to become of great utility to a large portion of the community seeking the very kind of information it purposes furnishing.

That a handy-book of the kind has long been needed, no one will deny; indeed, it has been a matter of surprise, that something of the sort has not ere this made its appearance. We have volumes out of number on popular medicine, public hygeine, and every possible means applied to the preservation of health; but I know of none to which suffering hu-

manity ean turn for counsel or advice as to the claims of those whose business it is, when that boon is gone, again to put them in possession of it. The common necessities of the siek or invalided, and the repeated inquiries of persons seeking the best means of relief under such eircumstances, demand any knowledge we ean afford to give on such topics; and this demand I shall endeavour to meet, being one of those who believe that the more people know about such matters, the less likely are they to fall into the hands of quacks and pretenders. Added to this, when danger threatens or difficulties present themselves, it will at the same time render them more competent to judge of what is needed, and to set a proper value on sound advice, superior skill, and appropriate treatment, when these advantages are met with. This can in nowise interfere with the prerogatives of the Profession, who have nothing to fear from enlightened patients, though everything to dread from ignorant ones; besides the object here, unlike most popular medical works, is not to teach every one to be their own Doctor, but simply how to select one.

In earrying out these ends, however, I have no lack of faith in the intelligence or capabilities of the general body of practitioners, nor of ordinary means in ordinary cases; but sometimes (unfortunately, too often) disease assumes such serious shapes, or (as in

chronic cases) either comes to a dead stand-still, or day by day keeps getting worse, that something more is called for, perhaps some special aid, for which the anxious sufferer looks wistfully around him, and asks,—"Where is it to be found?" Possibly in these pages? First, however, let my readers qualify themselves to decide in such cases. This they can readily do, by becoming better acquainted with the contents of the work, under the different heads into which the subject has been divided, and a few Pathological explanations, that will help to show the distinctions of disease, as well as "Doctors." Armed with such information, and much more that will be found useful, they will be able to form a tolerable idea of what is wanted. and not only what kind of professional aid is called for, but which offers the most probable chance of Common sense must soon convince the reader, that such a course will be far wiser than running about at random for the "Doctor," or wasting time and money by consulting—as thousands do—a dozen different men, the majority of whose services may be of no avail whatever in the case in point.

In conclusion, I could only wish that the human machine was so perfect, and its framework so *invul-nerable*, that the majority of my fellow creatures really had no occasion for our services. But since it is so —and even the best machines are liable to get out of

working order—there is nothing like knowing where to look for the best means of setting matters to rights again; which, as everybody knows, is more than half-way towards the cure. I am fully sensible that this—the first attempt to furnish this species of information—falls far short of all I could wish, or that perfection future editions of the work, I trust, may show. However, I have no fear but what has been done will be turned to much advantage, and be made available in a multitude of instances, where suffering humanity may be in search of such a guide, and life or limb might be lost for the want of it.

To prevent any misconception as to the true intent and purport of these pages, as well as to avoid any imputation commonly laid to the charge of *Medical* Writers, viz., — "The book being the means of making their name known, and thereby multiplying the number of their patients,"—I here beg to leave mine out, and therefore simply sign myself

THE AUTHOR.

London, 1863.

WHO TO CONSULT?

Who to consult? "That is the question;" and not unfrequently one of vital importance to suffering invalids in search of health, if not a matter of life and death in many cases. Certainly there are none it concerns so much as the sick, to look out for the most practised hand or skilled workman capable of putting the human machine—when disorganized, broken down, or out of gear-again in proper working order. It is a common want—a thing of daily occurrence—and felt by thousands seeking medical aid in some shape or other; whether these labours refer to repairing an injury, restoring the integrity of a part, or regulating disordered function; the damaged or deranged condition of which, in any way whatever, constitutes what we call disease, and the harmonious play of the whole what is termed health. To the sound in "wind and limb" these remarks may be of little moment, for the "whole need no physician;" but not so when the scene shifts, and pain and sickness or uncomfortable sensation take the place of bodily ease and robust health; then—and very naturally—most men are but too anxious to get the boon back again, and begin to look about them for the best means of doing so; which it is our business, if possible, to point out.

That the proper choice of the medical attendant must go a great way towards accomplishing this desirable end and enhancing the chance of recovery, there can be no doubt. In acute disease, how often the life of the patient, or, to say the least, the successful termination of the case, depends upon this timely measure; while in chronic cases, how many have died of "medicable wounds" and so-called incurable complaints, for want of knowing where to look for the special aid or particular skill that might have saved them. People in general, though unacquainted with their whereabouts, nevertheless are not altogether ignorant of the fact, that there are some men more distinguished than others in the treatment of the different forms of disease; and such in the hour of sickness and danger they seem anxiously in search of. Indeed, nothing is more common, than for medical men to be asked by their more intimate friends and acquaintance suffering under any serious affliction, such familiar questions as, "Who do you consider a clever man in such a case?" or, "Who would you advise us to consult?" Probably, at first sight, this may appear

rather a delicate query to put to the doctor; something like the landlord of a dilapidated dwelling inquiring of a builder, "who he would recommend to put the premises in repair?" Still, even in this case, it will require the labours of various artisans to make good the defects, from the shaky foundation to the shattered roof. The same thing applies to the human tenement out of repair, whether from bodily injury, acute disease, or a broken down constitution, the master hand in all cases is seldom concentrated in one man; for the work to be done will differ widely with the nature of the damage, and so should the workmen employed in its restoration. Now, provided the case is not within his own immediate province, or one to which others have more particularly devoted their attention, no right-minded medical man need be offended at such a question being put to him; but, on the contrary, will willingly afford all the information in his power, more especially when there is a probability of its leading to beneficial results. That it sometimes does so, daily instances of recovery prove, where suffering humanity, availing themselves of the means thus afforded, have found the long sought for relief.

Times out of number has the author of this manual been the medium of pointing out the source from whence the greatest amount of skill or judgment might be reasonably expected. Indeed, so convinced is he that, in many cases of serious or dangerous illness, protracted or special disease, this is the

surest mode of obtaining the best advice, that he has more than once thought of making it a specialité. There can be no question that a Physician well acquainted with the claims of his professional brethren, and competent to judge of their skill in particular forms of disease, could command one of the largest consulting practices in London by adopting the following plan, namely, by leaving the patient alone himself, otherwise than simply, after forming a correct diagnosis of the case, advising him or her, who to consult under the circumstances. Such a line of practice might be novel, it is true; but nevertheless useful. It would amount to much the same thing as taking "Counsel's opinion" as to the proper course to pursue in a legal difficulty; and probably prove quite as wise a step, in many medical cases, and certainly the cheapest in the end.

In furnishing this species of information, the reader will soon perceive that we have stepped aside from the beaten track in our undertaking, which differs very widely from anything in the shape of a Medical Register or Directory. These contain the names and qualifications of all classes of practitioners throughout the three kingdoms, consequently just so many thousands more than we have any occasion for. As the title of the work indicates, our limited list applies to Consulting Practitioners only—a few leading men of the Metropolis; the Profession at large would be foreign to our purpose. The difference—with regard to the

object in view—between such works and our own, is very plain and simple. We do not want to ascertain merely whether a man is qualified; but, what he is qualified for.

It is not to be expected that the general public are acquainted with the names or claims of all the celebrities in Medicine or Surgery, or their particular line of practice. Neither have they the time, or inclination, to wade through long lists of names, where possibly each one considers himself as eminent as his neighbour: and which makes it a difficult matter to choose. All they require is, a limited selection of some of the most distinguished among these, classified according to the maladies in which their services are more especially demanded, and where the afflicted or their friends can obtain, at a glance, the required information, and no more. This much we propose to give; but prior to entering upon that part of the subject, in order to qualify persons to judge for themselves in such matters, according to the necessities of the case, as well as to render our motives the more useful, we think it but proper they should first know, to what branch of the Profession the Practitioner belongs.

In cases of sudden danger or serious illness, the majority of persons make little or no distinction with regard to the different grades of the Profession. The common cry is, "Run for the Doctor;" a saying as

often misapplied as "Send for the Surgeon." According to popular notions, the term "Doctor" has a very wide range, as it appears to apply indiscriminately to any man with a red lamp over the door, or a blue bottle in the window. In addition to this mistaken notion, there appears just as much discrimination exercised with regard to the demands of the case, be it medical or surgical, a local injury or a constitutional disease. People unacquainted with the proper distinctions of the Profession, as frequently send for a Physician to reduce a dislocation, or set a broken limb, as for a Surgeon to conduct a case of typhus fever. Now, notwithstanding most Physicians have been educated in Surgery, and on the other hand most Surgeons know something of Medicine, each man must be more proficient in his own particular calling, if not more or less out of place Meddling with the other one's business.* The pathology and treatment of internal disease belong purely to the Physician. Bodily injuries, surgical diseases, and mechanical treatment, strictly to the Surgeon. Hence, if we admit the fact, "that a division of labour in any science tends to its perfection," the sick and suffering may rely upon it, that, in any case demanding a great amount of skill and judgment, relief is more likely to

^{*} There cannot be a stronger proof in support of this assertion, than the rule observed among the Physicians and Surgeons of our large hospitals. Immediately a case becomes purely medical, the Surgeon hands it over to the Physician; and per contra, when a medical case requires surgical assistance, the Physician transfers the patient to the Surgeon.

be obtained at the hands of that man who devotes his attention to one of these branches of the healing art only, than from another one who has not made that his more particular study.

It must be obvious that this division of labour, by suiting the Doctor to the case, instead of the case to the Doctor, gives the patient a greater chance of recovery; while it is to be regretted that the public pay so little attention to such important considerations in the treatment of disease. There are, however, a class of practitioners who consider themselves competent to master all branches of the science with equal skill and dexterity; and who, although they are neither Physicians nor pure Surgeons, practise both. These, as a matter of course, are averse to any division whatever of Medicine and Surgery, which they conceive to be injurious to the interests of the Profession: our business is to consider the interest of the Public, in preserve to any particular set of men. Ignorant persons, and those unacquainted with the difference, may plod on in the old way. But there are marked signs that the more intelligent are beginning to act otherwise. Indeed, much in the same way that medical men do themselves when sickness or danger overtakes any member of their own family. They seldom send for the Apothecary; but at once avail themselves of the superior advice or skill of the Physician or Surgeon [proper], according to the nature and necessities of the ease.

PROFESSIONAL DISTINCTIONS.

As the healing art is divided into different departments, so are its practitioners into distinct grades, according to the curriculum of study they have undergone, the qualifications they possess, or particular line of practice they pursue. These for the most part comprise the Physician, pure Surgeon,* Surgeon in general practice, and Apothecary. To these may be added, the subdivisions of Aurists, Oculists, Obstetric Physicians, and others practising special branches of Medicine and Surgery. The title of Physician, Surgeon, or Apothecary, would lead us to believe that each one was originally intended to practise a distinct branch of the Profession; and there can be no doubt but that this division of labour has tended to the welfare of the community, in so far as it has rendered the offices of each, singly, more serviceable to the sick, as well as the science itself more perfect. There may be

^{*} In making use of the term "pure Surgeon," we merely do so in the common acceptation of the phrase, which distinguishes him from the general Practitioner and Apothecary. We would not imply, that he treats disease solely by the aid of instruments or mechanical appliances. Surgery is no longer a handicraft; on the contrary, the truly clever Surgeon of the present day does not pride himself so much upon the mere carpentering part of the Profession, or his dexterity as an operator, as he does upon his knowledge of the best means science affords to obviate the necessity of resorting to such painful measures.

instances in which the capabilities of all these are combined in some individuals. Still it does not follow that they are positively so in every medical man. Until they are, perhaps such distinctions had better remain. Professionally, it is true, they are all members of the same family; nevertheless, they may not all possess the same amount of knowledge on any and every subject connected with the study of medicine and treatment of disease. These divisions rather serve to show, that their claims in point of skill, or their duties to the sick, are by no means identical. Indeed, even thus divided, it would be a difficult matter to reduce all ranks to the same level, regardless of superior attainments; while some, by a longer course of study, and consequently more profound acquaintance with the science, qualify themselves for the higher grades of their calling, whether in Medicine or Surgery.

Notwithstanding such distinction, however, the Medical Act now merges the whole into one common faculty; as it gives an equal right to all to practise medicine, or any branch of it, irrespective of rank or qualification. The Physician may practise surgery, the Surgeon medicine, the Apothecary both; though the higher class of Practitioners seldom do so. As to the competency of the different grades to undertake each other's duties on all occasions, we shall leave higher authorities presently to determine. The only qualification which seems to confer any-

thing like a right to practise either medicine or surgery, is the degree of Doctor of Medicine of one of our chief British Universities; as London, Edinburgh, Oxford, or Cambridge, where the examinations embrace all branches of the science. This by no means, however, applies to the ordinary licensing bodies; whose examinations, as a matter of course, differ (or did till very recently) with the department they preside over. The College of Physicians confining itself more especially to the subjects of Hygeine, Pathology, Therapeutics, and the Diagnosis and Treatment of Disease. The College of Surgeons, to Anatomy, Physiology, and Surgery. The Apothecaries' Company, chiefly to Chemistry, Materia Medica, and Pharmacy. Now, however useful each of these may be in its own sphere, the possession of a license in one branch of the science only can scarcely make a man master of the whole. Mere registration, then, can never transform the Apothecary into a Physician, or confer a common qualification on all. In order to put "the right man in the right place," it is not enough to know a person is qualified; but how,—what for,—and in what branches of Medical Science he has been educated? With this in view, therefore, we must still look to the course of study he has pursued, the examinations he has undergone, and particularly the character of the degree, license, or diploma he possesses.

To show the necessity of the public exercising

some little discrimination in such matters, we may now refer to the opinion of two of our most eminent Surgeons on the subject, taken from their Evidence before the Committee of the House of Commons on "Medical Legislation."

Sir Benjamin Brodic says:—"If persons come to me in strictly medical cases, I send them away. If a person comes with a complaint in his lungs, I say, 'You had better go to Dr. A., or Dr. B., or some other Physician.' I consider that the range of knowledge is so extensive, that no individual can master the whole; and that if you are to do any good, you must have a general knowledge of the whole, but cultivate one branch in particular."

Mr. Lawrence, referring to Schedule (C), remarks, under the head of London:—"All parties, Physicians, Surgeons, Apothecaries, and persons who were in practice before the Apothecaries' Act, appear in one list, as persons qualified to practise medicine. Now, suppose a party was ill, and he wanted to look at the Register, (although I think people do not call in their medical practitioners from looking at Registers), if a person from the country is taken ill in London, and he asks for this Register, he looks, and he sees a name; he has a fever; some person comes to him whose name he sees in the Register, and asks him, 'What is the matter with you?' He says, 'I have a fever.' The reply is, 'You should not have sent for

me; I should have been very glad to attend your wife, if she was going to be delivered; I am an Accoucheur.' He then sends for two or three others; he may send for a Surgeon, who would attend him if he had a broken head, but who cannot attend him in fever, but who, under the certificate, is qualified to practise medicine; or he may send to a mere Apothecary, who would say, 'If you had a slight cold, I could prescribe for you; but as you have a fever, you must send for a Physician.' That would be the fate of a person looking at this Register. He finds a number of people huddled together, who are all represented as persons qualified to practise medicine."

This is all very true, the reader may reply, and possibly in the same breath ask, as hundreds have done before—"How are ordinary people to distinguish the difference, or, in regard to 'doctors,' define 'WHO's WHO?" Nothing more easy, as we shall now endeavour to show. Persons unacquainted with these matters have merely to make themselves a little more familiar with those distinctions that properly belong to the different ranks and grades of the Medical Profession. This they may do by simply referring to the subject under the following heads.

PROFESSIONAL TITLES AND QUALIFICATIONS.

M.D. (Doctor of Medicine.)—This constitutes the highest degree in the science of Medicine, and can alone be conferred on medical men by the Chancellor and Academic Senate of the Universities, and that in the chief (residential*) ones, where degrees in medicine are granted; as, Oxford, Cambridge, London, and Edinburgh, only after regular attendance during each annus medicus, or medical session, on the several classes and subjects set down in the curriculum of study.† In each of

- * The term "residential" is generally used to distinguish those Universities requiring a regular academical course of study and attendance on the different classes during each session, before admitting any one to an examination for their degree.
- † Previous to commencing these studies, the candidate must first either possess a degree in arts, or undergo the preliminary or matriculation examination in Latin, Greek, Mathematics, Mechanics, Natural Philosophy, &c. Before he can take the degree of M.B. (Bachelor of Medicine,) he must pass through a course of study, first in Anatomy, Physiology, Natural History, Botany, Chemistry, Materia Medica, &c. Secondly, in the Practice of Medicine, Midwifery, Medical Jurisprudence, Hygeine, Pathology, Therapeutics, Clinical Medicine, Clinical Surgery, and Hospital Practice. In all of these he will have to undergo a strict examination. Finally, and before he is eligible for the full degree of M.D., he must pass at least three years in hospital or private practice, or in the military or naval medical service, after which, he may present himself for further examination. In addition to these, in some of our Universities, as Oxford, Cambridge, and Edinburgh, the caudidate has to compose a Thesis on some medical subject, and on a certain day publicly defend the same, before the degree can be conferred.

these, the candidate has ultimately to submit to a very strict and searching examination, both in writing, and by vivá voce interrogation, as well as practically by the examination of objects in Natural history—Materia medica—Botanical specimens—the performance of chemical tests—demonstrations on the dead body pathological specimens—and the diagnosis of disease, the patient being placed before him. The degree of Doctor of course differs widely in value, according to the source from which it is obtained. lengthened course of study required by the beforenamed Universities, first for the M.B., and finally for the M.D., together with the practical nature of the different examinations to which candidates are subjected in every branch of medicine, surgery, and the allied sciences, there can be no doubt that such degrees rank second to none in the kingdom: indeed, M.D. Ovon., Cantab., Lond., or Edin., attached to a Physician's name, may be taken as a pretty safe criterion of his professional acquirements and capabilities. Though, nominally, M.D. may be considered a medical degree, the examination in these Universities applies equally strict to the science and art of Surgery, and may be said to be the only test that properly qualifies a man to practise either or both branches of the Profession, or gives any claim to the right and title of DOCTOR.

M.B. (Bachelor of Medicine.)—The preparatory degree conferred by the Universities—after the usual course of study, and passing the first examinations

in the different branches of Medicine, Surgery, and the collateral sciences—upon candidates studying for the higher degree of M.D., or Doctor of Medicine.

M.C. (Chirurgiæ Magister, Master in Surgery.)—A new academic degree in Surgery, conferred only by the Universities (after a thorough course of study) on candidates passing an examination more especially in the practice and science of Surgery. This is not merely a surgical qualification, but carries with it a proof of medical knowledge; as those only are eligible for examination who have already taken the degree of "Bachelor of Medicine," and passed through the curriculum of study required for both.

L.M. (Licentiate in Midwifery.)—A person possessing a special qualification or licence to practise Midwifery, which is granted by certain Universities, Colleges, or Institutions devoted to the purpose, to duly qualified Physicians and Surgeons, who have undergone further study, and an examination in what is termed Obstetric Medicine, or the science and practice of Midwifery, including the diseases of women and children. It may be considered an extra qualification of the Obstetric Physician, or Surgeon practising more especially as an Accoucheur.

The Physician; F.R.C.P., M.R.C.P., L.R.C.P.*

—These initials, following the name of a Physician,

^{*} L.R.C.P.—The above does not refer to the recent licence of the London College under this name, which differs materially in

imply that he is either a Fellow, Member, or Licentiate of one of the Colleges of Physicians; but without the M.D. before them, these letters do not indicate that he is also a Doctor of Medicine. A Physician's diploma or licence alone cannot confer such a title on its members, as neither College of Physicians, London or Edinburgh, has any power to grant the academical degrees of an University. It does not follow, therefore, that a Physician is always a Doctor. However, as Mr. is rather an awkward prefix to a Physician's name, we find most of those of any standing in the Profession, usually possess the double qualification, or both titles; namely, in addition to their diploma or licence to practise as a Physician, the degree of M.D. as a Doctor of Medicine, and generally from one of the before-mentioned Universities in which they have graduated.

With regard to the line of practice, the Physician proper devotes his attention purely to the practice of medicine, or the pathology, diagnosis, and treatment of disease. He advises and prescribes only, but never furnishes the medicine, as does the general practitioner and Apothecary. They are divided into, Consulting Physicians—Physicians in ordinary practice

value from the former L.R.C.P. conferred on Graduates in Medicine and Physicians, a few years back, before the "year of grace." The present is a licence granted, under certain restrictions, to general practitioners, qualifying them to practise and dispense medicine, in place of, or as a substitute for, the L.S.A., or licence of the Apothecaries' Company. The former L.R.C.P. Lond., like the L.R.C.P. Edin. and Dub., rank with the present M.R.C.P.

—Obstetric Physicians—Physicians in Lunacy, and those on special diseases.

Consulting Surgeon. (F.R.C.S., Fellow of the Royal College of Surgeons.)—This title or qualification (when obtained by examination, or through distinguished professional skill) constitutes one of the highest grades of Practitioner in Surgery. Consulting Surgeon being also a Fellow of the College, in place of a Member, may be said to rank as much above the ordinary Surgeon, as the higher graduate in medicine and Physician does above the general practitioner and Apothecary. His practice is chiefly confined to the care and treatment of Surgical diseases, and most cases wherein instrumental or operative measures are called for. Like Physicians, Consulting Surgeons prescribe only, but never dispense or supply medicines. Properly, they seldom interfere in strictly medical cases, hence are often termed "pure Surgeons." As Consulting Practitioners, in point of rank they are on a par with the M.D. and Physician in Consulting practice. Some devote their attention to special branches of the science, as the Surgeon Aurist, Oculist, &c.

The Surgeon, M.R.C.S. or L.R.C.S.—The qualification of the Surgeon consists of the diploma of membership or license of one of the Royal Colleges of Surgeons of the United Kingdom, (Lond., Edin., or Dub.,) which confers on the possessor the

right to practise as a Surgeon, though more frequently he combines with that the functions of a General Practitioner. Ordinary Surgeons do not prescribe only, like the higher grades of the Profession, but usually furnish their own medicines. To the qualification of Surgeon they often add the licence of the Apothecaries' Company, others the recent L.R.C.P. of the College of Physicians.

The General Practitioner.—The General Practitioner, as the name implies, exercises all branches of the Profession—Medicine, Midwifery, Surgery, or any other section of the science. It usually consists of a combination of the Surgeon and Apothecary, or a person possessing either qualification practising as both. General Practitioners probably form by far the largest body in the Profession, and in small country towns generally the only ones. They usually dispense their own medicines.

The Apothecary, L.S.A. or L.A.C.—These possess the licence of the Apothecaries' Company, which confers the right to practise and dispense medicine; and formerly, before the Medical Act, none but licensed Apothecaries could recover for the same. It is a minor qualification compared to the others; though, from a clause inserted in the Poor Law Act, it seems essential to persons seeking a Parish or Union appointment. However, most men who avail themselves of it on these grounds—provided

they have higher qualifications—seldom make use of the title "Apothecary."*

FEES.

It may not perhaps be out of place here, to say something with regard to the charges made by these different grades of Medical Practitioners. The fee of either the Physician or *Prescribing* Surgeon for a *Consultation* is usually one guinea, and the same for a visit within reasonable distance. But this of course cannot apply to all cases; as where considerable time is taken up by minute inspection or examination, *special* cases, operations, &c.† Physicians in general practice, or

- * Although in England the term Apothecary applies to a Medical Practitioner dealing in drugs and furnishing his own medicines, in all other countries, and formerly in this, the sole business of the Apothecary was to practise Pharmacy, and to prepare and dispense the prescriptions of the Physician or Surgeon. We have some very old authorities on this point. In Exodus xxx. we read of "An ointment compounded after the art of the Apothecary." Again, according to a quaint writer in the sixteenth century, the duties of the Apothecary are defined thus:—"That he meddle only in his bocation, and do remember his office is to be the Phisicons cooke."
- † In *Physic*, like Law, pettifogging is a bad plan, and there can be no doubt about the *best* advice being the cheapest in the end. Therefore, in regard to recompense, when medical skill is worth anything at all, it ought not to be a matter of "pounds shillings and

attending the family regularly, now very generally manage to regulate their charges so as to come to little more, and probably in the end far less, than would be charged by those furnishing the medicine. To persons in middling circumstances, trades persons and others, some Physicians and Consulting Surgeons see patients twice for the same fee, some three times, and even the very poor frequently gratis. General Practitioners and Apothecaries usually make a charge first for visits or attendance, and secondly for the medicines supplied at the same time. All duly qualified Practitioners, registered according to the Act, can recover either for advice or medical or surgical attendance.

In regard to choice between the *Prescribing* and Dispensing Practitioner, the public must judge for themselves. Many consider the medicine being sent by the medical man more convenient. Others contend (and with good reason) that a prescription is far more satisfactory—inasmuch as it shows, not only what they have taken, but also how they have been treated; while the bottle (whose contents they are wholly ignorant of) furnishes no evi-

pence." The mere fee of a guinea can barely compensate such men. Taking into consideration the little fortune spent upon their education, the years of brain work and mental and bodily wear and tear before they can arrive at anything like a position, together with the serious responsibility imposed upon them, it may be said to be—although perhaps the most honourable, and certainly the most useful—the worst paid Profession in the world.

dence whatever of either. The greatest objection, however, that has been argued against practitioners who dispense their own medicine, is—"that the prescriber should never be the vendor," as it holds out an inducement to furnish more medicine than is absolutely necessary.* There may be some truth in this; at all events it is a very general complaint at the present moment; so much so, that many, on these grounds, have latterly come to the conclusion that in case of any serious illness, it is not only preferable, but positively cheaper in the end, to apply at once to the Physician, or Consulting Surgeon, according as the case is medical or surgical.

For the above reasons, among the more intelligent and better educated classes of the community, *Prescribing* Practitioners are now very generally superseding *Apothecaries*, and others who furnish medicines. Indeed, to meet the views of their patients, many of the more respectable *general* Practitioners, who formerly sent out medicines, now *prescribe only*; leaving the other portion of the work, *very properly*, to be

^{*} Judging from the host of bottles we frequently find erowded together on the chimney piece, or occupying every available hole and corner of the siek room, one might almost be led to believe the business of the Apothecary, like that of the publican, was to do as many gallons a day as he possibly could. But whose fault is this? Not the Practitioner's, but that of the public themselves; especially the uneducated portion, who like to see plenty for their money, and therefore prefer to remunerate a man according to the amount of medicine sent in (i. e. goods delivered), rather than for advice or skill, and medicine only when really needed.

done by the Dispensing Chemist, as it is in France by the *Pharmacien*. This is as it should be, and on the liberal principle of "live and let live." The truth is, that the Medical Profession is gradually undergoing a variety of changes, putting everything in its right place and each man in his proper sphere. So that, in the course of a very few years, except in some remote country places, there will be no intermediate class of practitioners between the prescriber and dispenser; in short, the Physician or Surgeon will write his prescription, and the Chemist "make it up;" and no doubt this in the end will lead to far less drugging.

The good or evil results to the sick from the exercise of the Medical Art, as a matter of course, depend much upon the honesty of the Practitioner. Like most things, it may be used or abused, turned to a beneficial or a bad account, made the means of mitigating a vast amount of human suffering, or inflicting so much injury, just as it happens to be employed with a truly benevolent intention, or solely for selfish ends. The profession itself is an honourable one, and there is no lack of honourable men in it. Conscientiously exercised, it is also a noble one; and considering its potent sway in checking the ravages of pestilence and disease, relieving pain and prolonging human life—a boon to man; if not (according to its mystic origin from the gods) "AN ART DIVINE." All this in the hands of good men it may be. But by those who, rather than look upon it in the light of a humane science,

merely take it up as a matter of trade, the Medical Art is both misunderstood and misapplied. This is just the reason why we so often find that, in the end, it neither answers the expectations of those who practise or those who are practised upon. Now daily instances are not wanting to show that there are men among us of this stamp, and it is this very class of practitioners that bring down unjust censure upon the heads of their more respectable brethren, with whom they have no right to be linked. And why?—not because they have degraded their cloth, but simply inasmuch as they have placed themselves on a level with the Quacks, Impostors, and Pill-mongers of the day. Like these, they conceive the business of the Medical Practitioner to consist of little else than making up drugs, and that of the Patient little else than swallowing them.

By way of illustration, and in order to show to what *lengths* this system may be carried, we are induced to give up a page or two to the following copy of a Bill, in popular phraseology, "as long as my arm," and a trifle longer, (transcribed from the columns of the "Daily Telegraph," July 10th, 1862,) which—and no wonder, the reader will add—winds up with "that last *charge* of all," the fee for signing the certificate of death!—

The Executors of E- D- J- to H- B-.

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PATHOLOGY,

AND

THE DIAGNOSIS, OR DISTINCTIONS OF DISEASE.

There is an old truism, that "a knowledge of a disease is half the cure;" which unquestionably holds good in many cases; at all events, it often goes a great way towards promoting recovery. The proper discrimination of a disorder, in technical language, is termed Diagnosis, or the art of distinguishing one form of disease from another. Now, notwithstanding this in many instances requires a tolerable amount of skill and judgment, even on the part of the Physician; nevertheless, in the majority of cases, people themselves, by watching the more prominent symptoms, may form some idea of the malady. This preliminary measure constitutes the first step in the treatment of disease, which, to ensure success, as we have already shown, must adapt itself to the requirements of the case. In seeking medical or surgical assistance, therefore, the wisest plan (where practicable, and the diagnosis simple) is to determine beforehand the kind of aid called for. To enable us to do so, some kind of nosological arrangement, or classification of disease, to which the reader may refer, seems indispensable; as the management of the case must essentially differ, according as the mischief arises from any one of the following causes—Physical injuries, Structural changes, or Functional disturbance;—which may be said to constitute the three grand divisions of disease.

CLASSIFICATION.

Physical Injuries.—These for the most part result from direct mechanical violence—as, blows, falls, concussions, cuts, bruises, &c. The most common among which are, sprains, dislocations, fractures, contusions, lacerations, punctured and incised wounds: Those from chemical destruction of the tissues of the body. by the contact or swallowing of corrosive fluids, as the concentrated acids or caustic alkalies. Poisoned wounds, bites and stings. The effects of heat and cold—as burns, scalds, frost bites, &c. Foreign bodies getting into the food or air passages. Suffocation. Strangulation, &c. Hæmorrhage, from ruptured blood vessels. Hernia, or protrusion of the bowel, from strains or weakness: with a variety of incidental or accidental causes of bodily injury, all of which demand the attention of the Surgeon.

Structural Changes. - These constitute the chief source of organic disease. The term structural applies to that class of maladies traceable to certain changes in the natural tissue of a part. Such alteration of texture may take place in flesh, bone, blood-vessels, brain or nervous system, secreting organs, or any substance of the body. It may manifest itself in a multitude of shapes, the form of disease varying with the cause, as the following examples will show. It may consist of mere enlargements of hollow organs, as dilatation of the heart, stomach, &c., from weakness, distension, or pressure. Hypertrophy, or unnatural increase in bulk from greater flow of blood to the part, and excessive nutrition. Atrophy, the reverse of the former, or wasting of the tissue from deficient nutrition. The formation of other tissues constituting morbid growths, as fatty, fleshy, glandular, or bony tumours, ossific deposits. Deposit of fatty globules in the substance of secreting organs, displacing the proper tissue, and thereby perverting their functions; as in fatty degeneration of the liver, kidneys, &c. Fatty deposits in the heart and coats of arteries, leading to dilatation, ancurism, and fatal hæmorrhage; or in the substance of the brain, leading to softening and insanity. Deposit of tubercle in the lungs, causing pulmonary consumption; or in the glands of the neck, forming scrofulous enlargements, abscess, &c. Cancerous deposits in the glands of the breast, uterine tissue, and other organs, giving rise to malignant growths. To these and many other causes must we look for the

origin of structural disorders. With regard to their treatment, we may add, where the disease is brought about by impaired or perverted nutrition, altered condition of the blood, morbid exudation, and other causes capable of being arrested or rectified by constitutional treatment, the case comes under the care of the Physician. Aneurisms, strictures, obstructions, morbid growths, and malignant tumours, come under that of the Surgeon.

Functional Disorders.—These differ from physical injuries, or organic disease, in being unattended with any perceptible change of structure in the first instance, though it may follow as a secondary result. Functional disturbance furnishes by far the greater number of maladies among the ills that flesh is heir to. It may be defined as that form of disease dependant on perverted action, or an alteration in the natural healthy function of a part or organ, manifesting itself in certain symptons to which we apply the different names of disease, according to the parts implicated. During life, every part or organ has its own peculiar duty to perform, necessary for the purpose of nutrition, in its physiological sense; namely, supplying our bodies with new material, and carrying off the old. While this process is in operation, our systems are undergoing constant change. Now, so long as this change goes on smoothly and uniformly throughout the body, it constitutes health; but immediately that equilibrium is disturbed, or the action of any organ, or set of organs, becomes unduly diminished or excited in proportion to the rest, functional disturbance follows, and disease is the result. state of things may be brought about by a variety of exciting causes, independent of direct violence to the body; as unwholesome food, impure air, damp unhealthy dwellings, defective drainage, putrid emanations from the soil, sudden atmospheric changes, contaminations of the air, contagion, infection, poison introduced or generated in the blood; fatigue, hard work and poor living, or sloth and luxury; anxiety, grief, intense study, dissipation, intemperance, depressing or debilitating passions. The morbid state induced, as previously observed, will differ with the function implicated, and to which we have only to refer for the disease. The chief functions are—1. Nutrition, which includes digestion, absorption, circulation, respiration, sanguification (blood making), assimilation (formation of the tissues), sccretion and excretion, or the casting off of effete matters from the body. 2. The functions of the brain and nervous system. 3. The functions of reproduction. From a disordered state of the first, we get debility, cachexia, congestion, inflammation, fevers, dropsies, dyspepsia, gout, rheumatism, gravel, disease of the kidneys, diabetes, scrofula, marasmas, consumption, cancer, and other af-From the second, head ache, delirium, coma, paralysis, insanity, hysteria, epilepsy, spasms, neuralgia, sciatica, &c. A disordered condition of the third function may lead to ovarian or uterine disease during gestation, to an arrest of development in the embryo, malformation and deformity of the fœtus, or to impeded fecundation and sterility in either sex. The treatment of most functional disorders belongs purely to the Physician.

These three chief divisions of disease will give the reader some idea of what class of maladies require Medical, and what Surgical treatment. In addition to the above distinction, some forms of disease are subdivided into idiopathic and traumatic, according as they arise from constitutional causes, or from wounds and injuries, as in traumatic erysipelas, &c. The same applies to fever, according as it is primary or secondary, idiopathic or symptomatic, resulting from contagion, &c., on the one hand; or suppuration, surgical wounds, or bodily injuries, on the other; the latter come under the care of the Surgeon, ordinary fevers under the Physician. There are, however, occasionally cases in which the separation of Medicine from Surgery, or vice versa, may not be practicable, or wherein medical and surgical treatment may be necessary at the same time. Hence the difficulty of a complete scientific division or classification of Medical or Surgical cases. The following Nosological tables of diseases, arranged under their relative heads, Medical or Surgical, are, according to custom, usually considered distinct: at all events, sufficiently so, to answer the purposes for which they have been drawn up; namely, pointing out what properly belongs to the Physician, what to the Surgeon.

NOSOLOGICAL TABLE OF MEDICAL AND SURGICAL CASES.

MEDICAL.

(Coming under the care of the Physician.)

STATES OF THE SYSTEM.—Plethoric, anemic, cachectic, chlorotic, nervous and debilitated. For signification, or characteristic symptoms, of any of these conditions of the system, refer to the Glossary of Terms.

Congestion.—An excess of blood in a part, preceding inflammation, fever, &c., as congestion of the lungs, liver, kidney, brain, &c., Serous or mucous membranes.

H.EMORRHAGE.—Bleeding (arterial or venous). From the lungs (spit, coughed, or hawked up), hæmoptysis. From the stomach (vomited), hæmatemesis. From the bowels, melæna, passed with the stools. From the uterus, menorrhagia. From the bladder (bloody urine), hæmaturia. [For Surgical Hæmorrhage, see p. 43.]

INFLAMMATION. (Acute and chronic.)—Of muscular and fibrous structure; as in rheumatism, &c. Of the skin and sub-cutaneous tissue; as in erysipelas. Of serous membranes; as in pleurisy, peritonitis, &c. Of mucous

membrane; as in *croup*, *bronchitis*. Of the substance or tissues of different organs; as the lungs (*pneumonia*), liver (*hepatitis*), stomach (*gastritis*), peritoneum (*peritonitis*), bowels (*cuteritis*), bladder (*cystitis*), &c. &c. [Refer to *Inftammation of Organs*.]

Dropsy.—An effusion and collection of serum, in the sub-cutaneous tissue, serous cavities, &c. Varieties: -Dropsy of the abdomen, ascites (a serous effusion, or a collection of water in peritoneal cavity lining the abdomen). Dropsy of the pericardium (or membranous bag surrounding the heart), hydropericardium. General dropsy, or dropsy of the flesh, anasarca (serous effusion and distension of the cellular tissue), generally commencing in the lower limbs. Local dropsy, ædema, the serous effusion limited to a part; as odema of the feet, ankles, &c. Organic dropsy, cardiac, from disease of the heart and obstructed circulation. Liver dropsy, from fatty degeneration of that organ, drunkard's liver, &c. (Page 38.) Kidney (or renal) dropsy, from congestion of the kidney, scarlet fever, &c. Ovarian dropsy, (encysted,) a collection of fluid in the uterine appendages of the female, termed ovaries, sometimes mistaken for pregnancy.

Fevers. (Farieties.)—Intermittent fever or ague, remittent or marsh fever, continued fever, typhus and typhoid, epidemic, bilious and brain fever, puerperal or child-bed fever. Eruptive fevers—small pox, scarlatina, measles, erysipelas, chicken pox, miliary or spotted fever.

RHEUMATISM. (Varieties.)—Acute or chronic inflammation of the fibrous tissue of the joints (articular-rheumatism), or of the muscles (muscular-rheumatism), as the muscles of the loins (lumbago), muscles of the sides (pleurodyne), of the heart (rheumatic carditis). Acute rheumatism (rheumatic fever). Rheumatic gout, &c. Rheumatic opthalmia.

DISEASES OF DIFFERENT ORGANS.

Brain.—Head-ache. Inflammation of the brain (encephalitis); of the membranes (meningitis). Congestion. Effusion (of serum, or blood), causing Apoplexy (sudden loss of consciousness and voluntary motion). Paralysis, &c. Chronic softening. Induration. Scrofula. Abscess, &c.

Spinal Cord.—Inflammation of the cord (myelitis), of the membranes (spinal meningitis). Congestion (effusion of serum or blood in spinal canal), forming spinal apoplexy. Softening and partial paralysis. Spinal irritation. Tetanic spasm. Locked jaw. Convulsions. St. Vitus's dance. Hysterics. Epileptic and Cataleptic fits. Lead palsy. Mercurial tremors, &c.

Nerves of Sensation.—Neuralgic pains. Nervous head-ache. Tic-doloreux. Sciatica. Numbness and loss of sensation in parts. Deprayed taste, smell, &c.

MIND.—Hypochondriasis (lowness of spirits). Insanity (deranged intellect). Melancholy madness. Delusions. Delirium tremens. Imbecility. Idiotcy. Acute and chronic mania.

Heart.—Inflammation of the muscular structure (carditis), frequently of rheumatic origin. Of the lining membrane (endocarditis). Of the membranous bag surrounding it, or pericardium, (pericarditis). Dropsy of the heart, water in the pericardium. [See Dropsy.] Structural disease:—enlargement, dilatation, diseased valves, fatty degeneration, wasting. Functional and nervous affections:—palpitation, fainting, neuralgia, sudden spasm (angina pectoris).

BLOOD-VESSELS.—Fatty degeneration and dilatation of the coats of arteries, leading to aneurisms, rupture and hæmorrhage. Inflammation of the veins (phlebitis), those of the leg (common in women after confinement). Phlegmasia dolens, limb white, shining, and much swollen.

MOUTH, THROAT, AND GULLET.—Thrush. Red gum. Diphtheria (inflammation of the mucous membrane of the mouth, and formation of a false membrane which skins off). Inflammation of gums and tongue. Salivation. Inflammation of the tonsils (tonsilitis). Inflammatory sore throat, quinsy, mumps. Inflammation. Spasm. Stricture, &c., of the gullet (æsophagus).

RESPIRATORY ORGANS.—Cold (catarrh). Influenza.

Asthma. Difficulty of breathing (dyspnæa). Hooping cough. Croup. Laryngitis. Bronchitis. Plenrisy (inflammation of the pleura or membrane lining chest and surrounding lungs). Congestion of the lungs. Inflammation of the lungs (pneumonia). Enlargement of the air cells (emphysema). Spitting of blood (hæmoptysis). Pulmonary consumption (phthisis). Alteration of voice (paraphonia). Loss of voice (aphonia).

Stomach. — Pain in (gastralgia). Inflammation (gastritis). Indigestion (dyspepsia). Heart-burn (cardialgia). Water-brash (pyrosis). Vomiting of blood (hæmatemisis). Stricture. Cancer. Ulcer, &c.

Bowels.—Inflammation of (enteritis). Obstruction. Constipation. Diarrhea. Dysentery. Colic. Cholera. Hemorrhage (melæna). Abdominal consumption (tabes mesenterica). Inflammation of the peritoneal covering (peritonitis). Peritoneal dropsy (ascites).

Intestinal Worms.—Large round worm (ascaris lumbricoides) (6 to 9 inches), inhabiting small intestines. Thread worm (ascarides), or common maw-worm, small thread-like, long and short ($\frac{1}{4}$ to 2 inches), occupying large intestines and lower bowels, especially the rectum, occasioning intolerable itching. Common long tape-worm (tænia solium) (5 to 10 feet) flattened head and body composed of numerous segments or joints, usually inhabits small intestines. Broad tapeworm (tænia lata), much broader segments than last,

and more numerous, 150 in a foot, (each joint fertile and eapable of reproducing thousands of its species); more common in Switzerland than in this country.

LIVER.—Inflammation, acute or chronic (hepatitis). Congestion. Obstruction of the bile duct. Gall stone. Jaundice. Abscess. Fatty degeneration. Hobnail, or drunkard's liver (cirrhosis), leading to dropsy.

Spleen and Pancreas.—Congestion. Enlargement. Inflammation, &c. Disease of the spleen generally leads to imperfect blood formation (*Leucocythemia*). Disease of the pancreas, leading to mal-assimilation of fatty and oily substances, which pass undigested, forming fatty stools.

Kidney.—Congestion and inflammation, acute or chronic desquamative (nephritis). Bright's disease, or disorganization of the kidney with albuminous urine, from congestion, inflammation, granular disease, fatty deposits or wasting. Diabetes (immoderate flow of urine in its natural state, or charged with sugar or chyle from disordered digestion and mal-assimilation). Incontinence of urine. Difficulty in voiding. Suppression (ischuria). Urinary deposits. Gravel, &c. Renal abscess. Suppuration. Gangrene.

BLADDER.—Catarrh or cold in the bladder. Stran-

guary, arising from cold, cantharides, blisters, &c. Inflammation. Incontinence of urine. Difficulty of voiding (dysuria). Spasm. Paralysis.

Skin.—Nettle-rash (urticaria). Inflammatory blush (erythema). Rose-rash (roseola). Erysipelas. Humid tetter, or running scab (eczema). Crusted scab (impetigo). Shingles (herpes). Blotched face. Aene. Violent itching (prurigo). Scurvy (purpura simplex), scorbutic eruptions, patches, and scales. Hæmorrhagic scurvy, from effusion of blood, as in bleeding of the gums, bleeding sores, &c. Scald head (porrigo). Ringworm (tinea). Scaly patches and scabs (psoriasis). Syphilitic eruptions (copper coloured spots). Leprosy (lepra). Elephantiasis. Arabian leprosy, or Barbadoes leg.

Muscles.—Muscular weakness, languor, and want of tonicity from debility, disordered nutrition, &c. Flabbiness. Fatty degeneration and wasting (alrophy). Muscular pain (myalgia). Acute and chronic muscular rheumatism:—Of the muscles of the side of the chest (pleurodyne). Of the back and loins (lumbago). Of the hip (coxalgia). Of the muscular fibres of the heart (rheumatic carditis). Twitching, numbness, cramps, and temporary spasms, from nervous debility, &c. Muscular disorders due to—disease or injury of the brain and spinal, cord, spinal irritation, direct or remote, from derangement of other organs. Rigid (or telanic) spasm:—Of the muscle of the jaw, or locked jaw. Of

the muscles of the back, abdomen, or sides, drawing the body backwards (opisthotonos), forwards (emprosthotonos), sideways (pleurosthotonos). Convulsions of the muscles, from disease in distant organs, and remote irritation of the sensitive nerves, being communicated to the spine, and reflected back on the muscles; as in Epilepsy, Hysteria, &c. St. Vitus's dance (chorea). Irregular action of the muscles when set in motion, from similar causes. Hydrophobia, spasm of the muscles of the pharynx and chest. Catalepsy, fixation of the muscles. Palsy or paralysis, loss of motion:
—of the muscles of the face (facial paralysis), of the limbs on one side of the body, usually the left (hemiplegia), of the lower part of the body (paraplegia).

BLOOD.—Impoverished or altered condition, from disordered digestion, depraved nutrition, secretion, &c.; as in anæmia, chlorosis, lencocythemia (pale blood), dyscrasia (bad habit of body); or some particular diathesis, as the scrofulous, consumptive, cancerous, gouty, gravelly, rheumatic, &c. Excess or deficiency of blood, as in the plethoric or anæmic conditions, hæmorrhage, &c. Excess or deficiency of its proper constituents in certain forms of disease; as increase of fibrine, in acute inflammation and inflammatory fever; decrease, in low fevers, loss of blood, debility, emaciation, scurvy, &c. Watery condition, decrease of albumen, as in Bright's disease of the kidney. Deficient elimination of effete matters. Impure and contaminated states of the blood:—from certain diseases—the forma-

—minero-metallic substances (as mercury, lead, or arsenic)—putrid emanations, malarial and atmospheric poisons, producing fevers, ague, &c. Accumulation of uric and lactic acid in the blood, as in rheumatic and gouty habits. Suppuration of the blood, or formation of matter in the same, from the secretion or absorption of pus (pyæmia.)

Scrofula.—The strumous diathesis, or that state of constitutional debility, combined with chronic inflammatory swellings, tumours, ulcerations, and a tendency to a deposit of what is termed tubercle, in different parts or organs of the body (tuberculosis). Scrofulous disease may manifest itself in a variety of forms, as scrofulous inflammation, enlargement and suppuration of the glands of the neck, king's evil, pustular eruptions about the mouth, nose, ears, and eyes. Strumous Opthalmia. Scabbed head. Indolent abscess. Scrofulous disease of the joints. Softening of the bones (rickets). Tibial and spinal deformity. Marasmus, wasting of the body (tabes mesenterica). Pulmonary consumption, &c. The constitutional treatment of scrofulous disease properly belongs to the Physician; but in many cases Surgical assistance is also necessary. [See Surgical Cases.]

General Diseases.—Coming under the care of the Physician, as those due to—Depraved nutrition of the tissues, from mal-assimilation, imperfect digestion,

sanguification or secretion,—Changes in the blood, from defective elimination of effete matters therefrom. Urinary deposits. Gravel. Inflammation. Fevers. Dropsies. Rheumatism. Lumbago. Gout. Cutaneous affections. Cachectic conditions. Tubercular and cancerous deposits. Uterine complaints. Diseases of women and children, &c. &c.

SURGICAL CASES.

(Coming under the care of the Surgeon.)

Symptomatic Fevers.—Surgical forms of fever, consequent on violent inflammation, from severe injuries, operations, long standing disease, debility, exhaustion, suppuration, and the absorption of pus into the blood. These may be of the inflammatory, irritative, hectic, or typhoid type.

Collarse.—Sinking or prostration of the vital powers, from the shock of severe injuries, surgical operations, concussion of the brain, loss of blood, &c. [Symptoms:—faintness, depression, semi-conscious or bewildered state, coldness, feeble pulse, and sighing respiration]. If not severe, reaction and recovery may take place, under the proper use of warmth and stimulants; or fever, coma, and delirium may follow. The

fatal signs are cold sweats, hiccup, slow laboured breathing, and pulse at the wrist becoming gradually fainter.

HEMORRHAGE (Surgical).—Active or arterial, as bleeding from the nose (*epistaxis*), from the bowels, as in bleeding piles (*hæmorrhoids*), from the rupture of a blood vessel, from puncture or gunshot wounds. Secondary hæmorrhage, from the separation of sloughs, or bursting of recent wounds.

INFLAMMATION.—The chief forms of inflammation that concern the Surgeon are:—The adhesive inflammation of healing wounds. The suppurative, of abscess. The ulcerative, of the skin. Erysipelatous, or diffused inflammation of the sub-cutaneous (cellular) tissue. The scrofulous, of the glands. The gangrenous, of wounds and foul ulcers. Inflammatory fever, following severe injuries, surgical operations, &c. Inflammatory affections, attended with alteration of structure, or causing obstruction, wherein local and constitutional treatment are necessary at the same time.

ERYSIPELAS.—The surgical forms of the disease, attended with suppuration and sloughing of the subcutaneous cellular tissue. Traumatic erysipelas, resulting from wounds, injuries, surgical operations, &c., especially in persons of a *cachectic* habit of body or unsound constitution, or during the prevalence of *idiopathic* erysipelas or any epidemic disease.

Suppuration.—Inflammatory effusion, infiltrating the tissue of a part or organ, and forming pus, acute, chronie, or diffused abscess. Suppuration:—Beneath the skin, from deep-scated erysipelas (cellulitis).—In the glands of the neck, from tubercular deposits, forming scrofulous abscess.—In the glands of the groin, from the absorption of syphilitic poison (bubo).—In the cellular tissue, forming boils, carbuncle, and malignant pustule, from a bad state of the blood, diseased meat, &c.—From escape of urine, forming urinary abscess. Suppuration in the blood (pyæmea), from inflammation of the veins (phlebitis), after wounds, injuries, surgical operations, removal of tumours, &c.

ULCERATION.—From various causes, as inflammation, the application of caustic irritants, morbid poisons in the blood, pressure, languid or impeded circulation, any cause destroying the tissue, or leading to defective nutrition, and finally the death and disintegration of the part. The varieties of ulcer consist of—the inflamed, irritable, weak, indolent, varicose, fistulous, sloughing.

Mortification.—Gangrene, or the death of a part, from violent inflammation, frost bite, local injury, morbid irritation, obstructed circulation. Varieties:—Acute or moist gangrene, from wounds, injuries, compound fracture, surgical operations, sloughing sores, erysipelas, epidemic contagion. Chronic or dry gangrene, from deficient supply of arterial blood to a part,

and defective nutrition. Any cause preventing the return of venous blood from the part back to the heart, long-continued pressure, as in sloughing bed sores, chronic disease, cachexia, debility, old age (senile gangrene). When circulation and vitality in a part is entirely destroyed, it becomes cold and livid, pain ceases, and a red line of demarcation divides the living from the dead part.

Scrofula.—The Surgical cases of scrofulous disease comprise:—Chronic tumours. Strumous abscess. Suppuration of the glands of the neck (King's Evil). Scrofulous disease of the bones, as rickets. Softening. Spinal disease. Scrofulous caries of the vertebræ. Lumbar and psoas abscess. Scrofulous affections of the joints. White swelling, &c.

Cancer.—Malignant growths, or tumours due to depraved nutrition, and cancerous exudation from the blood deposited in the tissues or organs of the body. This deposit may give rise to—scirrhus or hard cancer, encephaloid or soft cancer, fungus hæmatodes or bleeding cancer, colloid or jelly-like cancer, melanotic or black cancer (from a déposit of pigment in addition to cancerous materials). The most common seats of cancer are the breast and uterus; but it may attack any organ, flesh or bone. The state of the system is termed the cancerous cachexia or diathesis, and the disease malignant disease. It is characterized by more or less debility, emaciation, and a peculiar depraved

digestion, leaden sallow complexion. [Malignant disease being constitutional, this treatment belongs properly to the Physician: when extirpation or removal is practicable or advisable, to the Surgeon.]

SURGICAL DISEASES OF PARTS OR A ORGANS.

Bones.—Acute and chronie inflammation. Abscess. Neerosis. Caries. Exfoliation. Morbid enlargement (hypertrophy). Nodes on the shin bone. Bony tumours (exostosis). Wasting. Softening (atrophy), causing bending. Brittleness. Rickets. Distortions. Spinal curvature. Scrofulous and caneerous disease. Injuries and fractures. Ill-set and imperfectly united fractures, forming "false joints," deformities, &c.

Joints.—Acute and chronic inflammation of the synovial membrane lining the joint (synovitis), as in painful puffy swellings of the knee-joint. Rhenmatic arthritis. Dropsy. Stiffness. Immobility. Anehylosis. Sprains, twists, dislocation, wound, &c. Ulceration of the eartilages. Abscess. Scrofulous disease. White-swelling. Hip-joint disease. Housemaid's knee, acute inflammation (from kneeling) of the bursa, a

bag secreting a lubricating fluid between knee-cap and skin.

Muscles.—Sprains from over-stretching of muscles and their tendons. Wounds or lacerations. Rupture from violent exertion, as snapping of the tendo-Achilles in dancing. Rigidity and shortening, as in wry-neck, club-foot, &c. Acute inflammation of the fascia or covering of muscles, tendonous sheaths, &c., from punctured wounds or splinters in the fingers, producing thecal abscess or tendinous whitlow. Ganglionic tumours on the finger joints. Concretion, and chalk stones.

Blood-Vessels.—Wounds of arteries. Rupture of blood-vessels. Secondary hæmorrhage, or oozing of blood from unhealed wounds. Aneurisms (pulsating tumours formed by the rupture or dilatation of an artery). Varix and nævus (tortuous enlargements of smaller blood-vessels). Varicose veins. Varicocele. Inflammation of the veins (phlebitis), following wounds, operations in surgery, &c., leading to suppuration and the formation of pus in the blood (pyæmia).

Skin.—Surgical Injuries. Wounds. Lacerations. Bruises (echymosis). Chaps. Chilblains. Frostbite. Burns. Scalds. Bites, Stings. Poisoned wounds. Inflammation. Ulceration. Lupus. Sloughing of the integument. Gangrene, &c. Scrofulous sores. Secondary syphilitic forms of skin disease. Excres-

cences. Warts. Condylomata. Cancroid and fungoid growths. Cancer.

Sub-Cutaneous. (Under the skin.) — Boils. Carbuncles. Painful subcutaneous tumours. Inflammation. Suppuration. Abscess and sloughing of the cellular tissue (cellulitis). Phlegmonous or deepseated erysipelas. Urinary abscess and fistula (as in the perinaum), from extravasation and escape of urine into the cellular tissue. Malignant pustule (from handling or eating the flesh of diseased animals). Fleshy, fatty, vascular, and encysted tumours (wens). Cancerous and other sub-cutaneous tumours. Emphysematous, puffy tumours, from air in the cellular tissue.

Head.—Wounds of the scalp. Erysipelas. Concussion and compression of the brain, from blows, falls, &c. Extravasation of blood. Fractures and depression of the skull. Protrusion of the brain (hernia cerebri). Tumours of the scalp. Malignant growths. Trephining in fracture. Tapping in hydrocephalus.

EYE.—Wounds, blows, bruises, and discoloration (echymosis). Foreign substances in the eye. Inflammation and disease of the eyelids. Acute or chronic inflammation of the conjunctival coat of the eye (opthalmia). Purulent, scrofulous, and rheumatic inflammation and diseases of the eyeball, sclerotic coat, cornea, iris, &c. Discoloration of the pupil (glaucoma). Cataract (opacity of the crystalline lens).

Impaired vision (amaurosis), long and short vision. Cancer of the eyeball (melanosis). Diseases of the lachrymal apparatus. Inflammation of the lachrymal sac. Closure of the tear duct. Obstruction of the nasal duct. Overflow of tears. Lachrymal fistula, &c.

EAR.—Deafness. Disease. Injury. Accumulation of wax. Obstruction. Polypus. Pencil, Pins, Peas, Beads, or other substances wedged in the passages. Perforation of the membrane, tympanum, or drum of the ear. Inflammation. Abscess. Suppuration. Purulent discharges. Scrofulous disease. Caries of the bones. Obstruction of the Eustachian tube. Throat deafness.

Nose.—Bleeding from the nose (*epistaxis*). Substances lodged in the nasal passages. Obstruction from tumours or nasal polypus. Corroding ulcers. Lupus. Cancerous, Scrofulous disease, &c. Caries of the bones. Fractures. Displacement.

MOUTH AND THROAT.—Gangrene and corroding ulcers (cancrum oris). Hare lip. Cancer. Enlargement of the tonsils (requiring excision). Salivary fistula. Cleft palate. Abscess of the antrum, or hollow of the upper jaw. Caries and Necrosis of the jaw. Stricture of the gullet, windpipe, &c. Æsophagotomy, Laryngotomy, and Tracheotomy (openings necessary for the removal of foreign bodies from the æsophagus, larynx, or trachea, or in cases of threatened suffocation

from the ædema of the glottis). Acute laryngitis. Croup, &c.

Neck.—Wens. Broncochele. Derbyshire neck. Wry neck. Tumours of the lymphatic glands. Scrofulous abscess, &c.

Breast.—Morbid enlargement. Acute and chronic inflammation. Abscess of the breast. Cracked and excoriated nipples. Lacteal tumours (from obliteration of the milk ducts). Abscess of the lacteal tubes. Chronic, cystic, and cancerous tumours.

Chest.—Surgical diseases and injuries. Pneumothorax (air in the cavity of the pleura, or membrane lining chest and surrounding lungs); from without, by penetrating wounds of the chest, or fractured ribs piercing the lungs; from within, by bursting of an abscess in the lungs, forming an opening into the pleural cavity. Emphysema (puffy tumours, from escape of air into the cellular tissue), from fractured ribs and the above causes penetrating lungs. Hæmothorax, blood in pleural cavity, from wounded lung or artery, and internal hamorrhage. Empyema, pus in the cavity of the pleura, from suppuration in acute pleurisy, abscess in the chest, &c. Hydrothorax, dropsical effusions in the pleura (water on the chest). Hydropericardium (dropsy of the pericardium or membranous bag surrounding the heart), in all of which puncturing or tapping to draw off the fluid

may be required. Wounds of the chest, fractured ribs or sternum (breast-bone).

Spine.—Distortions. Lateral and angular curvature. Rickety spine. Bifid spine, and bulging tumours of the back. Scrofulous disease and caries of the vertebra. Psoas abscess. Concussions of the spinal cord. Extravasation of blood. Dislocation of the vertebra. Fracture, &c.

Bowels.—Obstructions. Strangulation. Intususception (upper part of the gut slipping into the lower). Ulceration. Perforation. Disease of the rectum (lower bowel). Abscess. Stricture. Hæmorrhoids. Fistula, &c. Blows and wounds of the abdomen (belly). Protrusion and laceration of the intestines. Tapping the abdomen in peritoneal dropsy, removing tumours, &c.

Hernia.—Rupture or tumours, formed by protrusion of the bowel, from the walls of the abdomen giving way through weakness, distension, violent exertion, lifting heavy weights, &c. (Varieties): Inguinal hernia—of the groin (more frequent in men). Femoral hernia—of the thigh (more frequent in women). Umbilical hernia—of the naval (more frequent in children). Ventral hernia, &c. They become reducible (i.e. capable of being returned into the abdomen), irreducible, and strangulated.

URINARY ORGANS.—Diseases of the bladder. Inflammation. Cold. Spasm. Stricture. Retention of urine. Inflammation at the neck of the bladder. Enlargement of the prostrate gland, and all cases requiring the use of bougie or catheter. Extravasation of urine. Urinary abscess. Urinary fistula. Stone (calculus) in the kidney, ureter, or bladder. Surgical operation for removal of the same. Lithotrity, crushing; lithotomy, cutting for the stone.

These tables of reference may serve the purpose of the general reader; but to render any nosological arrangement perfect, according to strict pathological principles, diseases, properly, should be classified, not according to their *symptoms*, or the consequences they give rise to, but in conformity with the disordered condition of the organ or function concerned; as for example, the diseases of nutrition, diseases of the nervous function, &c. The plan, however, here adopted, may be more familiar.

It should be mentioned, also, that these tables are of necessity incomplete, as from motives of *delicacy* some diseases are purposely *omitted*.

SPECIALITIES

AND

Medical and Surgical Authorities for Consultation

IN PARTICULAR CASES.

In regard to the term Speciality, as well as the authorities to whom we now refer, we would not imply that all or any of these gentlemen merely treat a single disease: on the contrary. What we really desire to show is,—that, as Physicians or Consulting Surgeons, they cultivate a particular line of practice, or division of medical labour. This may consist of— MEDICINE, or the treatment of the various forms of functional disease (as those connected with the different processes of Digestion, Nutrition; Brain and Nervous System; Functions of Reproduction, &c.; - Operative Sur-GERY, and the treatment of the surgical forms of disease; — Opthalmic Medicine and Surgery; — Aural Surgery; — Obstetrics, or Midwifery; — Uterine Complaints; —Diseases of Women; —Diseases of CHILDREN, &c. These may be said to comprise the socalled Specialities to which we allude, and not to any single feature in pathology, or separate form of disease; which will be evident to the reader by the same names being repeatedly referred to under different heads.

The authorities herein named have been selected from among the most distinguished and successful Practitioners of the day, not only for their skill or celebrity in that particular case, but probably any other coming within the same range. At all events, they may serve as a guide to the reader's selection; or, where relief is possible, point out to the patient or his friends the man most likely to answer their expectations.

In making this selection, however, we would not imply that these were the only men; or lead the reader to infer that there was any deficiency among the other eminent members of the Medical Profession making up our lists, the majority of whom are not only equally skilful, but equally successful in the same branches of Medicine or Surgery, notwithstanding they may never have written on the subject, or treated it as a Speciality.

The simplicity, as well as convenience for reference, of this tabular arrangement will be seen at a glance. The reader having made out as nearly as possible the nature of the case, and whether medical or surgical, after referring to that form of disease, has simply to select from the columns of Physicians or Surgeons any one of the authorities named under that head.

INDEX OF DISEASES.

(For Disease, if not made out, refer to part or organ under the head of Nosological Table, page 33.)

ABSCESS.

Messrs. H. Coote—Fergusson—Partridge—Paget—Quain — Holt—Hancock—Hilton—Simon—Solly—or any other eminent Surgeon.

[See Boils and Carbuncles, Syphylis, Scrofula, &c., according to nature of Abscess.]

ABDOMEN (Diseases of).

Dr. Habershon—Dr. Hare—Dr. Basham—Dr. Ballard—and other eminent Physicians.

[See Alimentary Canal, Corpulence, Dropsy, Ovarian Disease, &c.]

ABDOMEN (Surgical Diseases of).

[See Rupture, Hernia, Wounds, &c.]

ALBUMINOUS URINE (Disease of the Kidney).

[See Bright's Disease.]

ALIMENTARY CANAL (Disease of the Stomach and Bowels).

Dr. Brinton—Dr. Habershon—Dr. Budd—Dr. Babington—Dr. Watson—Dr. C. H. Jones—Dr. Chambers—and other Physicians.

[For Surgical Diseases sec Hernia, Rectum, &c.]

ANEURISM (A Pulsating Tumour filled with blood from rupture or dilatation of the coats of an Artery).

Messrs. Lawrence—Fergusson—Hodgson—Erichsen—Judd—and other eminent Surgeons.

ANEURISM (Internal, of the chest, termed Thoraic).
Dr. C. B. Williams—Dr. Walshe—Dr. Jenner—Dr. Fuller—and other Physicians.

[Sec Heart Disease, Chest, &c.]

APOPLEXY (Congestion or rupture of the blood-vessels of the Brain).

Dr. Babington—Dr. Burrows—Dr. Gull—Dr. Watson—Dr. Winslow—or any other of the Physicians.

ASTHMA.

Dr. H. Salter—Dr. H. Davies—Dr. Ramadge—Dr. C. J. Fox—or any of the Physicians on Chest Diseases.

BLADDER (Inflammation, Stranguary, Spasm, Paralysis, &c.): (Medical cases.)

Any eminent Physician.

BLADDER AND PROSTRATE (Retention of Urine, &c.): (Surgical cases requiring use of Cathetur.)

Messrs. Holt—Curling—Coulson—Fergusson—Cock—Hilton — Lane — Lee — Judd — Johnson — Travers — Thomson—Wakley—and others.

[See Stricture.]

BLOOD DISEASE (Chronic Anæmic and Cachectic conditions, as in — Syphilitic and Mercurial Cachexia, Chronic Skin Disease, Tubercular Cachexia (a scrofulous habit of body), Gout, Rheumatism, &c.)

Dr. Scott—Dr. T. Smith—Dr. Garrod—Dr. Fuller—and other Physicians.

[See Syphilis, Scrofula, Climatorial Cachevia, &c.]

BOILS AND CARBUNCLES.

Messrs. Travers—Tatum—Coote—Paget—Partridge—Solly—or any of the principal Surgeons.

[See Tumours.]

BONES (Diseases of).

Messrs. Canton—Coote—Le Gros Clark—Lawrence—Fergusson—and other eminent Surgeons.

BOWELS (Inflammation, Obstruction, Constipation, Colic, Peritonitis, &c.)

Any Physician.

[See Alimentary Canal.]

BOWEL (Strangulation, Rupture, Prolapsis, &c.)

[See Hernia, Rectum, and Fistula.]

BRAIN (Congestion, Inflammation, &c.)

Dr. Babington—Dr. Burrows—Dr. Radcliffe—Dr. Watson—Dr. Winslow—Dr. Williams—Dr. Gull—and other Physicians.

[See Delirium Tremens and Mental Disorders.]

BREAST (Surgical Diseases of).

Messrs. J. Birkett—Lawrence—Fergusson—Paget—and other Surgeons.

[See Cancer, Tumours, Discases of Women, &c.]

BRIGHT'S DISEASE (Fatty Degeneration of the Kidney).

Dr. H. B. Jones—Dr. G. O. Rees—Dr. Garrod—Dr. G. Johnson—Dr. Goodfellow—Dr. Basham—Dr. Birkett—Dr. Corfe—and other Physicians.

BRONCHITIS.

Any of the Physicians under the head of "Chest Diseases."

CACHEXIA (A bad habit of body or unhealthy condition due to depraved nutrition). Altered or contaminated states of the blood. Syphilitic or scrofulous taint (tuberculosis). Gouty diathesis, &c.

[See Blood Disease, Consumption, &c.]

CATARACT (Opacity of the Eye, obstructing vision).

Messrs. Lawrence—Bowman—W. W. Cooper—T. W. Jones—and other Opthalmic Surgeons.

[See Eye.]

CANCER.

Dr. Walshe. (Surgical cases):—Messrs. Fergusson—Birkett—S. Wells—C. H. Moore—J. Z. Lawrence—or other eminent Surgeons.

[Cancer of the Uterus, see Uterine Complaints.]

CHANGE OF LIFE.

Dr. Tilt—Dr. R. Lee—Dr. T. Smith—or any Physician on "Uterine Disease."

CHEST DISEASES (of the Respiratory Organs):
Croup. Bronchitis. Asthma. Pleurisy. Pneumonia, or Inflammation of the Lungs. Hæmoptysis (spitting of blood). Pulmonary Consumption, &c.

Dr. Walshe—Dr. C. J. Williams—Dr. Latham—Dr. Alison—Dr. G. H. Rowe—Dr. Quain—Dr. Fuller—

- Dr. R. Bennett—Dr. Beattie—Dr. H. Davis—Dr. Bright—Dr. Markham—Dr. Sibson—Dr. Ramadge—Dr. Leared—Dr. Pollock—Dr. Jeaffreson—Dr. Cotton—Dr. E. Smith—and others.
- CHILDREN (Scrofulous Diseases of), Tuberculosis, &c. Dr. Jenner—Dr. Scott—Dr. T. Smith. (General Diseases of): Dr. West—Dr. Wiltshire—Dr. R. Bennett—Dr. Harris—Dr. Buchanan—Dr. Hillier—and other Physicians.
- CHILDREN (Surgical Diseases of).

 Messrs. J. C. Forster—Holmes—Price—Savage—
 Savory—and other Consulting Surgeons.
- CHOREA (St. Vitus's Dance).

 Dr. Brown Sequard—Dr. Radcliffe—Dr. Ramskill—Dr. Reynolds—and others on "Nervous Affections."
- CHLOROSIS (Green Sickness): an Anamic, Cachectic condition, from disordered Menstruation, &c.
 - Dr. R. Lee—Dr. T. Smith—Dr. Tilt—Dr. F. Bird—Dr. Bennett—and other Physicians on "Uterine Complaints."
- CLIMATE (For Consumptive Invalids).

 Dr. Walshe—Dr. Williams—Dr. Beattie—Dr. Bright—
 Dr. Bennett—or any of the Physicians on "Chest Diseases."
- CLIMATORIAL CACHEXIA (Depraved Digestion and altered condition of the blood from long residence in *tropical* countries, India, &c.) Sir R. Martin—and other Physicians.

[See also Liver, Leucocythemia, and Blood Disease.]

CONSUMPTION (Pulmonary, of the Lungs, or Phthisis.)

Dr. Williams—Dr. Walshe—Dr. Alison—Dr. Rowe—or any of the Physicians on "Chest Diseases."

CONSUMPTION (Abdominal—tabes mesenterica, Marasmus, &c): Defective nutrition and consequent emaciation from scrofulous degeneration of chylopoietic organs, and deposit of tubercle in mesenteric glands (tubercular cachexia).

Dr. Scott—Dr. Tyler Smith—and other Physicians in Scrofulous Cases.

CORPULENCE.

Dr. Chambers—and others.

[See Abdomen, Dropsy, &c. If in women, see also Ovarion Discase.]

DEAFNESS (Diseases of the ear, Eustachian tube, throat, tonsils, &c.)

Messrs. Toynbee—Harvey—Holthouse—Wakley—and other Consulting Surgeons, or Surgeon Aurists.

DEFORMITIES (Spinal Curvature, Club Foot, &c).

Dr. Little—Messrs. Brodhurst—Chance—Chapman—
Coote—Tamplin—and other Consulting or Orthopædic
Surgeons.

DELERIUM TREMENS.

Dr. Barclay—Dr. Burrows—Dr. Camps—Dr. Watson—Dr. Winslow—an l other Physicians.

[See Brain, &c.]

DIABETES (Immoderate flow of insipid or saccharine urine).

Dr. Barlow—Dr. Basham—Dr. H. Bence Jones—Dr. G. Johnson—Dr. Garrod—D. G. O. Rees—Dr. Pancy—Dr. Hassall—and other eminent Physicians.

DIARRHŒA (Dysentery, Cholera, &c.)

Dr. Babington—Dr. Brinton—Dr. Budd—Dr. Gull—Dr. Wilson—Dr. Watson—and other Physicians.

DIPTHERIA.

Dr. Jenner—Dr. Greenhow—Dr. Ballard—and others.

DISLOCATIONS.

Messrs. Fergusson—Travers—Tatum—Hancock—Holt—Hilton—Canton—Holthouse—Holmes—Flower—or any of the principal Surgeons.

DROPSY.

Dr. Babington—Dr. Basham—Dr. G. H. Roe—Dr. Watson—or any other eminent Physician.

EAR.

Messrs. Toynbee—Harvey—and others.

[See Deafness.]

EPILEPSY.

Dr. Brown Sequard—Dr. Radcliffe—Dr. Ramskill—Dr. Ogle—Dr. Reynolds—Dr. Wilson—and other Physicians on "Nervous Disorders."

ERUPTIONS.

[See Skin Disease.]

ERUPTIVE FEVERS (Small Pox, Measles, Scarlatina, &c.)

Dr. Babington—Dr. Jenner—Dr. Stewart—Dr. Murchison—Dr. Munk—Dr. Wilson—Dr. Watson—and other Physicians.

[See also Diseases of Children.]

ERYSIPELAS (*Idiopathic*, or constitutional): Violent inflammation of the skin and cellular tissue, (*generally of the face*): contagious and often *epidemic*.

Dr. Wilson—Dr. Babington—Dr. Watson—or any other Physician.

[See Skin.]

ERYSIPELAS (Traumatic). Surgical cases: Attacking Wounds, &c.

Messrs. De Morgan—Erichsen—Fergusson—Paget—or any of the principal Surgeons.

EYE (Diseases of).

Messrs. Bowman—Dixon—W. Cooper—T. W. Jones—H. Walton — Critchett — France — Hogg — Hulke — Hulme—Mackmurdo—and other eminent Oculists.

FEVERS.

Dr. Tweedie—Dr. Stewart—Dr. Babington—Dr. Jenner — Dr. Cormack — Dr. Murchison — Dr. Munk — Dr. Peacock—or any of the Physicians.

FEVERS (Puerperal or Child-bed Fever).

Dr. Murphy—Dr. Cormack—Dr. R. Lee—or any Obstetric Physician.

FEVER, RHEUMATIC (Acute Rheumatism).

Dr. Garrod—Dr. Fuller—Dr. G. O. Rees—or any other on Gout, Rheumatism, Blood Disease, &c.

FISTULA (Diseases of the Rectum, or lower Bowel, Hæmorrhoids, &c.)

Messrs. Quain—Curling—Lee—Paget—H. Smith—and other Surgeons.

FITS.

[See Apoplexy, Epilepsy, Hysteria, &c.]

FRACTURES.

Messrs. Hilton—Hancock—Holt—Fergusson—Tatnm—Travers—Partridge—Solly—or any of the principal Surgeons.

[See Injuries.]

GENITO-URINARY ORGANS (Diseases of).

Messrs. Lawrence — Lane — Lee — Judd — Curling—Coulson—Cock—Hilton—Johnson—Thomson—Childs—and other Surgeons.

GOUT AND RHEUMATISM.

Dr. Garrod—Dr. Fuller—Dr. F. Hawkins—and other Physicians.

[See Blood Disease.]

GRAVEL (Urinary Deposits, &c.)

Dr. H. B. Jones—Dr. G. O. Rees—Dr. Garrod—Dr. Birkett—Dr. Beale—Dr. Hassell—and other Physicians.

GUN-SHOT WOUNDS.

Messrs. Poland—Paget—Fergusson—Partridge—Judd—Lawson—Blenkins—Pollock—or any of the principal Surgeons.

[See Wounds, &c.]

HEART DISEASE (Enlargement, Valvular Disease, Fatty Heart, &c).

Dr. C. B. Williams—Dr. Walshe—Dr. Latham—Dr. Billing—Dr. Barclay—Dr. Markham—Dr. Alison—Dr. Davies—Dr. Quain—Dr. Cockle—and others on "Chest Diseases."

HEART (Rheumatic Affections of: Carditis, &c). Dr. Garrod—Dr. Fuller—and other Physicians.

HŒMORRHOIDS.

[See Rectum, Fistula, &c.]

HERNIA (Rupture, Protrusion, or Strangulation of the Bowel).

Messrs. Lawrence — Fergusson — Hancock — Hilton—Quain — Erichsen — Holthouse — Tatum — Poland — Pollock — Cock — Gay — Ward — Wood — or any of the chief Surgeons.

HOOPING-COUGH.

Dr. G. H. Rae—Dr. C. B. Williams—Dr. Walshe—Dr. H. Salter—and other Physicians on Chest Complaints.

[See also Diseases of Children.]

HYDROCEPHALUS (Water in the Head).

Dr. R. Bennett—and other Physicians on Scrofulous Diseases of Children.

HYSTERIA.

Dr. Lee—Dr. Tilt—Dr. Tyler Smith—or any of the Obstetric Physicians—or those on Diseases of Women.

INDIGESTION (Diseases of Stomach, Liver, &c.)
Dr. Watson—Dr. H. B. Jones—Dr. Bndd—Dr. Brinton
—Dr. Habershon—Dr. Leared—Dr. Chambers—or any
of the Physicians.

INJURIES (Wounds, Contusions, Hamorrhage, Fractures, Concussions, Shocks, &c., from blows or falls).

Messrs. Lawrence — Fergusson—Partridge—Tatum—Haucock — Quain — Erichsen — Holthouse—Poland—Pollock — Juo. Adams —Wood — Gay—Ward—Hilton—Cock—Solly—or any of the chief Surgeons nearest at hand.

INSANITY.

[See Mental Disorders.]

JOINTS (Swelling of—Synonial Inflammation from Articular Rheumatism).

Dr. Garrod—Dr. Fuller—Dr. Scott—or any other of the Physicians on Gout, Rheumatism, Blood Disease, &c.

JOINTS (Surgical Diseases of).

Messrs. Barwell — Brodhurst — T. Bryant—Canton—Coulson—Cooper—Coote—Hilton—Hugman—Spencer Wells—or any other eminent Surgeon.

KIDNEY (Bright's Disease of).

Dr. H. Bence Jones—Dr. G. Owen Rees—Dr. Garrod—Dr. Barlow—Dr. Basham—Dr. Goodfellow—Dr. Corfo—and other eminent Physicians.

[See Albuminous Urine.]

LEUCOCYTHEMIA (White cell-blood: an anæmio-cachectic condition, with pallor, debility and emaciation, due to disordered viscera, spleen, &c., leading to imperfect blood-formation and a deficiency of red cells).

Dr. Bennett, Edinburgh.

[See Blund Disease, Cachevia, &c. If from Climate, see Climatorial Cachevia.]

LEUCORRHŒA.

[See Diseases of Women.]

LIVER (The Diseases of).

Dr. Budd—Dr. Brinton—Dr. H. Bence Jones—Dr. C. H. Jones—Dr. Watson—or any other of the Physicians.

LUNGS.

Dr. Williams—Dr. Walshe—Dr. Latham—and other Physicians.

[See Chest Diseases, Consumption, &c.]

MENSTRUATION (Obstructed or disordered).

[See Diseases of Women.]

MENTAL DISORDERS (Insanity, &c.)

Dr. Conolly—Dr. Monro—Dr. Sutherland—Dr. Winslow—Dr. Burrows—Dr. Bissett Hawkins—Dr. Tuke—Dr. Joseph Williams—and other Physicians.

MERCURY (The injurious effects of Mercurial Cachexia, &c.)

Dr. Habershon—and other Physicians.

[See Cachexia, or Blood Disease.]

NERVOUS DISORDERS (Neuralgia, Cramp, Spasm, Catalepsy, Epilepsy, Paralysis, &c.)

Dr. Burrows—Dr. Brown Sequard—Dr. Radcliffe—Dr. Camps—Dr. Sieveking—Dr. Wilson—Dr. Reynolds—and other Physicians.

OPTHALMIA (Inflammation of the Eye).

[See Surgeon Oculists, under Diseases of the Eye.]

OVARIAN DISEASE (Ovarian Dropsy, Uterine Tumours, &c.)

Dr. Simpson (Edinburgh)—Dr. Lee—Dr. Tilt—Dr. Tyler Smith—Dr. Snow Beck—Dr. Frederick Bird—Messrs. Baker Brown—Spencer Wells—and others.

[See Obstetric Practitioners.]

PARALYSIS.

Dr. Burrows—Dr. Radeliffe—Dr. Gull—Dr. Brown Sequard—Dr. Ramskill—Dr. Reynolds—Dr. Watson—Dr. Wilson—and other Physicians on Mental and Nervous Affections.

PROSTRATE GLAND (situated near the neck of the Bladder—Inflammation, Enlargement, &c.)

Messrs. John Adams—Cock—Coulson—Curling—
Thomson—and other Surgeons.

[See Bladder.]

PREGNANCY.

[See Obstetric Practitioners or Physician Accoucheurs.]

PUERPERAL FEVER (Child-bed Fever).

Dr. Fergusson—Dr. Murphy—Dr. Lee—or any other Obstetric Physician.

POISONING.

The nearest medical man at hand. Suspected cases of, for Analysis—Dr. Alfred Taylor.

RECTUM (Lower Bowel—The Diseases of).

Messrs. Quain — Curling — Lee — and other eminent Surgeons.

[See Fistula.]

RETENTION OF URINE.

[See Urine, Bladder, &c.]

RHEUMATISM (Rheumatic Fever, Gout, &c.)
Dr. Garrod—Dr. Fuller—Dr. G. Owen Rees—Dr. Haw-kins—Dr. Wilson—and other Physicians.

RICKETS (Scrofulous Disease, with Defective Nutrition and Softening of the Bone.

[See Scrofula.]

RINGWORM AND DISEASES OF THE SCALP.
Dr. Jenner—Messrs. Erichsen—Erasmus Wilson—and others.

RUPTURE.

[See Hernia.]

SCIATICA.

Dr. Fuller—Dr. Radcliffe—or any other of the Physicians.

SCROFULA (Tubercular Cachexia, Consumption, &c.)
Dr. Williams—Dr. Walshe—Dr. Jenner—Dr. Hamilton
Rae—Dr. Tyler Smith—Dr. Scott—and other Physicians.

SCROFULOUS DISEASES OF CHILDREN. (Tuberculosis).

Dr. Jenner—Dr. Scott. Surgical Forms of Scrofula: Messrs. Savory—Price—and other Surgeons.

SCURVY.

Dr. G. Owen Rees—Dr. Garrod—and other eminent Physicians.

SIGHT (Near Sight, Long Sight, Disordered Vision, &c.)

Messrs. White—Cooper — Haynes—Walton—or any other of the eminent Surgeon Oculists.

[See Eye.]

SKIN DISEASE.

Messrs. Erannis Wilson—Startin—Hunt—and others.

[For Syphlitic Forms of Skin Disease, see Syphilis, Scrofula, Blood Disease, &c.]

SMALL POX.

Dr. Babington—Dr. Watson—Dr. Jenner—and other Physicians.

[See Eruptive Fevers.]

SMALL POX.

Dr. Jenner—Dr. Stewart—Dr. Tweedie—Dr. Babington—Dr. Watson—or any other eminent Physician.

[See Fevers.]

SPEECH (Impediment of). J. Bishop, Esq.

SPITTING OF BLOOD (*Hæmoptysis*: generally a premonitory sign of Pulmonary Consumption).

Any Physician on Chest Complaints or Consumption.

STOMACH (The Diseases of).

Dr. Budd—Dr. Brinton—Dr. G. H. Jones—and other Physicians.

[See Alimentary Canal.]

STONE (Operations for —Lithotrity, crushing; Lithotony, cutting for the Stone.)

Messrs. Fergusson — Curling — Coulson — Skey — or other Operating Surgeons.

STRICTURES (Of the Urethra, Retention of Urine, &c.)

Messrs. Holt—Thomson — Curling—Coulson—Cock—Hilton—Judd — Travers—Wakley—Wade—and other Surgeons.

STRICTURES (of the Rectum).

Messrs. Quain—Curling—Lee—Macilwain—and other Surgeons.

SYPHILIS.

Messrs. Judd—H. J. Johnson—Lawrence—Lane—Lee—Cutler—Childs—or any other eminent Surgeon.

SYPHILITIC CACHEXIA (Secondary Affections of the Skin, Bones, &c.)

Any of the above.

[See also Blood Discuse.]

SYPHILIS (Hereditary—of infants).

[See Children.]

TABES.

[See Consumption.]

THE PROPERTY.

[See Dental Practitioners, page 94.]

TUBERCULOSIS.

Dr. Jenner—Dr. Scott—Dr. Tyler Smith—and other Physicians in Scrofulous Cases.

TUMOURS.

Messrs. Lawrence — Cæsar Hawkins — Fergusson — Partridge — Paget — Travers—Birkett—Coote—Macilwain—and many other Surgeons.

[According to nature of Tumour, see Aneurism, Breast, Bones, Hernia, Scrofula, Syphilis, Ovarian Disease, &c.]

TUMOURS (Abdominal).

Dr. Haro—and other Physicians.

[See Dropsy and Ovarian.]

TYPHUS AND TYPHOID FEVER.

Dr. Jenner-Dr. Stewart-and other Physicians.

[See Fever.]

ULCERS.

Messrs. Chapman — Paget — Skey — Travers — Hunt — and other Surgeons.

ULCER (of the Stomach, Gastric Ulcer).

Dr. Brinton—and others on Diseases of Stomach and Alimentary Canal.

URINE (Retention of).

[Soo Bladder, Stricture, &c.]

URINARY DEPOSITS (Gravel, &c.)

Dr. Bence Jones—Dr. G. Owen Rees—Dr. Garrod—Dr. Beale—Dr. Birkett—and other Physicians.

[See Bladder, Kidney, Diabetes.]

UTERINE COMPLAINTS (Affections of the Womb, Morbid Growths, Polypus, Ulceration, Cancer, &c.)

Dr. Robert Lee—Dr. Tilt — Dr. Tyler Smith — Dr. Bennett,—Dr. Beck—Dr. Bird—Dr. Barnes—Dr. Conquest—Dr. Murphy—Dr. Oldham—Dr. West—and other Obstetric Physicians.

VARICOCELE (Varicose Veins, Vascular Tumours, &c.)

Messrs. Lee—Curling—Erichsen—and other eminent Surgeons.

VESICO-VAGINAL, AND RECTO-VAGINAL FISTULA (Fistulous Openings between the Bladder or Rectum and Vagina).

Dr. Simpson (Edinburgh)—Messrs. Spenser Wells—Baker Brown—and others on the Surgical Diseases of Women.

WOMEN (The Diseases of—Disordered Menstruation, Change of Life, Diseases of Pregnancy, Parturition, &c).

Dr. Robert Lee — Dr. Tilt — Dr. Tyler Smith — Dr. Bennett—Dr. Beck—Dr. Barnes—or any of the Obstetric Practitioners in List.

WOUNDS AND CONTUSIONS.

Messrs.Fergusson—Quain—Partridge—Paget—Poland—Polleck—or any of the principal Surgeons.

LISTS

OF

Eminent Medical and Surgical Authorities FOR CONSULTATION.

The following pages, in accordance with the object of the work, contain the names of Consulting and Prescribing Practitioners only, selected from among those of a certain status or locus standi in the Profession, either as Authors on the subject, Writers in the Medical journals, or Physicians and Surgeons well known as successful Practitioners in such cases.

The names are arranged in alphabetical order, simply with a view to convenience for reference, and not with regard to any professional precedence.

After referring to the Index of "Diseases, Specialities," &c., or deciding otherwise, according as the case is *medical* or *surgical*, the name may be found by looking down one of the lists either of Physician's or Consulting Surgeons.

The names of Obstetric Practitioners or Physician Accoucheurs, left out in this list, will form a separate list at the end.

To save time and space, as well as prevent confusion, the initials of the *higher* degrees or titles only will be added to the names. Further qualifications, of no

material consequence in this work, will be found in the Medical Register or Directory.

*** Should the name of any Gentleman, whose professional position or qualifications entitle him to a place in either of these lists, be unintentionally omitted, it will be inserted in the next edition. Any communication in reference to this work may be addressed to ——— The Editor, care of the Publishers.

Physicians.

ALDERSON, J., M.D., F.R.S., 17, Berkeley Square.

ALDIS, C. J., M.D., 1, Chester Terrace, Chester Square.

ALISON, S., M.D., 80, Park Street, Grosvenor Square.

ARNOTT, N., M.D., 2, Cumberland Terrace, Regent's Park.

ASHBURNER, W., M.D., 7, Park Place, W.

ASHLEY, W. H., M.D., &c., 58, Ladbroke Square, W.

BABINGTON, B. G., M.D., F.R.S., 31, George Street, Hanover Square.

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BARCLAY, A. W., M.D., 23a, Bruton Street, Berkeley Square.

- BARKER, T. A., M.D., 71, Lower Grosvenor Street, W.
- BARLOW, G. H., M.D., 12, Union Street, Borough, S.E.
- BASHAM, W. R., M.D., 17, Chester Street, Grosvenor Place.
- BEALE, L. S., M.D., F.R.S., 61, Grosvenor Street, W.
- BEALEY, A., M.D., 27, Tavistock Square, W.C.
- BEATTIE, W., M.D., 13, Upper Berkeley Street, W.
- BENNETT, J. H., M.D., 60, Grosvenor Street, W.
- BENNETT, J. R., M.D., 15, Finsbury Square, E.C.
- BILLING, A., M.D., F.R.S., 6, Grosvenor Gate, Hyde Park.
- BIRD, F., M.D., 62, Park Street, Grosvenor Square.
- BIRD, J., M.D., 1, Brook Street, Grosvenor Square.
- BIRKETT, E. L., M.D., 48, Russell Square, W.C.
- BLACK, P., M.D., 11, Queen Anne Street, Cavendish Square.
- BRIGHT, J. R., M.D., 12, Cambridge Square, Hyde Park.
- BRINTON, W., M.D., 24, Brook Street, Grosvenor Square.
- BRISTOWE, J. S., M.D., 3, St. Thomas' Street, Borough.
- BROWN-SEQUARD, C. E., M.D., F.R.S., 25, Cavendish Square.

- BUCHANAN, G., M.D., 75, Gower Street, W.C.
- BUDD, G., M.D., F.R.S., 20, Dover Street, Piccadilly.
- BURROWS, G., M.D., F.R.S., 18, Cavendish Square.
- CAMPS, W., M.D., 40, Park Street, Grosvenor Square.
- CARPENTER, W. B., M.D., F.R.S., 8, Queen's Road, W., Regent's Park.
- CHAMBERS, T. K., M.D., 22B, Brook Street, Grosvenor Square.
- CLARK, A., M.D., 23, Montague Place, Russell Square.
- COBBOLD, T. S., M.D., F.L.S., 39, Norland Square, Notting Hill.
- COCK, F., M.D., 1, Westbourne Park Terrace, W.
- COCKLE, J., M.D., F.L.S., 63, Brook Street, Grosvenor Square.
- COLLUM, R., M.D., 1, Chester Place, Hyde Park Square.
- CONOLLY, J., M.D., 37, Albemarle Street, Piccadilly.
- COPLAND, J., M.D., F.R.S., 5, Old Burlington Street, W.
- CORFE, G., M.D., 9, Nottingham Terrace, Regent's Park.
- CORMACK, J. R., M.D., F.R.S., 5, Bedford Square, W.C.
- COTTON, R. P., F.R.C.P., 46, Clarges Street, Piccadilly.
- CRAWFORD, A., M.D., Waterloo Chambers, Cockspur Street.

- CROSS, R., M.D., 20, New Street, Spring Gardens.
- CURSHAM, G., M.D., 55, Victoria Street.
- DAVIES, H., M.D., 23, Finsbury Square.
- DAVIS, J. H., M.D., 11, Harley Street, Cavendish Square.
- DE MUSSY, H. G., M.D., 4, Cavendish Place, Cavendish Square.
- DICKSON, R., M.D., F.L.S., 16, Hertford Street, Mayfair.
- DICKINSON, W. H., M.D., 11, Chesterfield Street, Mayfair.
- DICKSON, W., M.D., 14, Trinity Square, Tower Hill.
- DOBELL, H. B., M.D., 29, Duncan Terrace, City Road.
- DRYSDALE, G. and C., M.D., 39, Southampton Row, W.C.
- EDWARDS, G. N., M.D., 1, Finsbury Square, E.C.
- ELLIOTSON, J., M.D., 37, Conduit Street, Regent Street.
- EVANS, C., M.D., 37, King Street, Covent Garden.
- EVANS, G. F., M.D., 43, Addison Road, Kensington.
- FARRE, A., M.D., 12, Hertford Street, Mayfair, W.
- FINCHAM, G., M.D., 8, Eccleston Terrace South.
- FOX, W., M.D., 32, Cavendish Square.

- FOX, C. J., M.D., 30, New Broad Street, City.
- FRASER, P., M.D., 63, Grosvenor Street.
- FREUND, J. C., M.D.,
 7, West Street, Finsbury Circus.
- FRODSHAM, J. M., M.D., 17, Victoria Square, Buckingham Gate.
- FULLER, H. W., M.D., 13, Manchester Square, W.
- FURNIVAL, J. J., M.D., 14, Alexander Street, Westbourne Park.
- GAIRDNER, W., M.D., 12, Bolton Street, Piccadilly.
- GARROD, A. B., M.D., F.R.S., 84, Harley Street, W.
- GOODFELLOW, S. J., M.D., 5, Saville Row, W.
- GOOLDEN, R. H., M.D., 41, Sussex Gardens, W.
- GREENHOW, E. H., M.D., 77, Upper Berkeley Street.
- GULL, W. W., M.D., 26, Brook Street, Grosvenor Square.
- GUY, W. A., M.D., 26, Gordon Street, Gordon Square.
- HABERSHON, S. O., M.D., 22, Wimpole Street, W.
- HALLEY, A., M.D.,
 7, Harley Street, Cavendish Square.
- HARE, C. J., M.D., 41, Brook Street, Grosvenor Square.
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- HARRIS, F., M.D., 24, Cavendish Square.
- HASSALL, A., M.D., F.L.S., 74, Wimpole Street, Cavendish Square.
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 28, Harley Street, Cavendish Square.
- HAWKINS, B., M.D., F.R.S., 29, Upper Harley Street.
- HAWKINS, F., M.D., 18, Bolton Street, Piccadilly.
- HAWKSLEY, T., M.D., 26, George Street, Hanover Square.
- HEADLAND, F., M.D., F.L.S., 37, Margaret Street, Cavendish Square.
- HEBERDEN, T., M.D., 43, Park Street, Grosvenor Square.
- HILLIER, T., M.D., 21, Upper Gower Street.
- HODGKIN, T., M.D., 38, Bedford Square, W.C.
- HOLLAND, SIR H., M.D., F.R.S., 29, Brook Street.
- HOOD, W. C., M.D., F.L.S., Bethlehem Hospital.
- JACKSON, J., M.D., 28, George Street, Hanover Square.
- JEAFFRESON, H., M.D., 8, Finsbury Square, E.C.
- JENNER, W., M.D., 8, Harley Street, Cavendish Square.
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GLOSSARY.

The explanation of most of the *Pathological* and technical terms to be met with in this work, have already been given under the Nosological arrangements of "*Medical* and *Surgical* cases." Where they have not, the following may be found handy for reference with regard to the meaning of things, with which the *general* reader may not be so familiar.

ABDOMEN.

The central cavity of the body or "belly." Containing on the right side the liver; on the left, the stomach, spleen, and pancreas; below these, folds of the large and small intestines, and on each side one of the kidnies. The membrane lining this cavity, and more or less covering the organs, is the *Peritoneum*.

ABDOMINAL.

Relating to the Abdomen, as Abdominal Tumours, Abdominal Dropsy, &c.

ACUTE.

Sharp and violent, as where the disease sets in with greater intensity, and at the same time makes more rapid progress. The reverse of *chronic*, or slow and long-continued disease. Most diseases are at the outset *acute*, and, if not cured, may verge into the chronic form. The intermediate phase between the two extremes is termed *sub-acute*.

ALIMENTARY CANAL.

The entire length of the food passage commencing with the month and terminating with the anus; including the mouth, pharynx or swallow, esophagus or gullet, stomach, and whole length of the intestinal canal.

ANÆMIA. (Bloodlessness.)

Acute and chronic. The former from hormorrhage, or loss of blood; the latter from its insufficient formation, and a deficiency of the red particles and solid constituents. A state of the system characterized by a pale or waxy complexion, depraved appetite, constipation, languar, debility and emaciation.

ANEURISM.

A tumour caused by the giving-way of the internal coats of an artery, leading to a dilatation at that part of the vessel. Known from other tumours by its pulsation as an artery.

ARTERIES.

The vessels conveying the blood from the heart, for distribution throughout the body, (the veins returning it back to the heart). The minute network of blood vessels between the two are the Capillaries.

ARTERIAL.

A term in common use to distinguish Arterial from Venous blood, as in its passage through the body the blood both changes its colour and composition. Arterial being bright scarlet; Venous, dark purple, popularly termed "black blood."

CACHEXIA.

An unhealthy condition or bad habit of body, common to many disordered states of the system. It may be here-

ditary or acquired, as in the Tubercular or Scrofulous, Syphilitie, Mercurial, Gouty, Cancerous, Climatorial, and other Cachectic states. Symptoms—Sallow dusky complexion, dyspepsia, constipation, offensive emanations from the body, debility, emaciation, and a disposition to swellings, boils, cruptions, and skin disease.

CHLOROTIC.

From *Chlorosis* (Green Sickness). An anæmio-eachectie condition, common to young women leading a sedentary life or subjected to close confinement, or the result of obstructed menstruation or other causes. The symptoms are those of anæmia, with a sallow complexion, swollen ankles, depraved appetite, and extreme debility.

CONGESTION.

Fulness from an excess of blood in the part, and over distention of the vessels. The forerunner of inflammation, fever, dropsy, hemorrhage, apoplexy, &e.

CRISIS.

The critical time at which a *change* for better or worse takes place in acute disease, fever, &c., leading either to a favourable or fatal result. The patient having passed beyond this stage, in popular phraseology is said "to have got the turn."

DIAGNOSIS.

The art of detecting the nature of the disease, and distinguishing it from others according to its seat, signs, and more prominent symptoms. (Page 27.)

DIATHESIS.

An hereditary taint or predisposition in some persons to particular forms of disease, or a more than usual liability to their development upon any debilitating cause. As in the Strumous or Serofulous diathesis, Phthisical or Consumptive, Gouty or Rheumatic. Lithic or lactic acid diathesis. Phosphatic, Oxalic, Hamorrhagic, or Seorbutic diathesis.

EFFUSION.

A pouring out of scrum or blood, as in serons or sanguineous apoplexy, from congestion of the brain. Serons effusions, from serous membranes forming dropsies.

ENDEMIC.

Common among the people of a certain country, locality, or district. As Ague in marshy lands; Malarial fevers in swamps; Goître in Alpine districts; Yellow fever in the West Indies; Cholera in the East Indies.

EPIDEMIC (Upon the People).

Or attacking numbers of persons at the same time, as when Influenza, Fever, Small Pox, Cholera, &c., is said to be raging or "very prevalent."

FEVER (A Burning).

A term applied to that class of diseases characterized by langour, debility, loss of appetite, and cold chills, followed by a hot skin, furred tongue, great thirst, full and frequent pulse. These symptoms are the natural results of disturbed function, (digestion, secretion, circulation, &c.,) leading to Congestion and General Excitement of the Nervous System; the fever being an effort of nature to throw off the Poison.

FEVER. (Divisions and Varieties.)

Divisions: — Primary, or Idiopathie; Secondary, or Symptomatic.

PRIMARY:—When the fever is the result of epidemic eontagion, malarial, or other poisons entering the blood. Continued Fever, (running an uninterrupted course); 1. Simple Continued Fever; 2. Typhus or Low Fever; 3. Typhoid Fever, (a modification of the former, or last stage of vital prostration.) Intermittent Fever:—Ague (having intermissions or intervals between each attack). Remittent Fever (where the symptoms subside, but do not altogether cease).

Secondary or Symptomatic Fever (when the result of other diseases, suppuration, wounds, injuries, &e.; as, *Hectic* Fever in Consumption, *Irritative* Fever in Injuries, *Surgical* Fever, *Puerperal* Fever, *Phlebitis*, &e.)

ERUPTIVE FEVERS (Exanthemata).

Contagious Diseases, commencing with Fever and followed by an Eruption, as—Small Pox, Cow Pox, Chicken Pox, Measles, and Scarlatina.

FUNCTION.

In *Physiology*, the office or duty of any particular organ, as that of the stomach, liver, heart, lungs, skin, glands, kidneys, bowels, bladder, brain, nervous system, &c.; and the purposes of life these serve, as the function of digestion, secretion, excretion, circulation, motion, sensation, &c. &c.

FUNCTIONAL DISORDERS.

Diseases due to diminished, excessive, or perverted action in any organ or set of organs concerned in the processes of nutrition, innervation, reproduction, or any other vital process. The majority of diseases are due to Functional Derangements. [Page 30.]

HEREDITARY DISEASES.

Pathological or morbid Conditions transmitted from parents or ancestors to offspring or descendant, sometimes termed an "hereditary taint." The chief diseases propagated by this means are Scrofula, Consumption, Gout, Gravel, Calculus, Syphilitic Taint, and Insanity. If both parents have a tendency to the same complaint, the liability of offspring is greater.

IDIOPATHIC.

A disease of itself, not due to or dependent on another, which distinguishes it from Symptomatic.

INFLAMMATION.

That form of disease characterized by pain, heat, redness, and swelling, from an augmented circulation in the part, congestion of the capillary blood vessels, and increased nervons sensibility. It may terminate in—resolution (inflammatory action subsiding)—in fever—in hæmorrhage—in effusion of serum (ædema and dropsy) or fibrin forming adhesions—in suppuration or formation of pus (abscess)—in ulceration, and mortification. (Varieties)—Acute or active inflammation (violent in character); chronic or passive inflammation (slow in its progress).

LOCAL.

The disease being limited to a part, not general or affecting the whole system. Hence, diseases are divided into Local and Constitutional.

MALIGNANT DISEASES.

A term applied to cancerous and fungoid growths, forming malignant tumours, destructive ulcerations, &c.

Generally the result of local irritation, as friction, blows, &c.; in a cachectic or bad habit of body, giving rise to a morbid exudation from the blood. Frequently hereditary.

MALARIA.

Marsh miasma, or the emanations from decayed vegetable matter deposited on marshy lands, or rising from ill-drained soils, &c.

MARASMUS (Atrophy).

Wasting and emaciation.—In childhood—from messenteric disease, tubercular deposits, &c. In adults—from depraved nutrition, mercurial and syphilitic cachexia, and other exciting causes of debility.

MEMBRANES.

The lining or coverings of the different organs or internal parts, as—the *mucous* membranes of the mouth, nose, eyes, air passages, alimentary canal, bladder, organs of generation, the *serous* membranes lining the chest (*pleura*, *pericardium*, &c.), and the cavity of the abdomen (*peritoneum*), the membranes of the brain, &c.

NERVOUS DISEASES.

Affections of the nervous system, in which the brain and its membranes, spinal chord, the nerves of sensation, or those of voluntary motion, are concerned.

NERVOUSNESS

The Nervous State. A condition characterized by timidity, palpitation, depression of spirits, anxiety, fear, &c., and usually accompanied by debility, indigestion, flatulency, and constipation. Causes.—In Women, grief, anxiety, long suckling, profuse dis-

charges, and other causes of debility. In Men, excessive study, dissipation, etc.

NEURALGIA.

Sudden pangs or darting pains, as those in the region of the heart (Neuralgia Cordis), of the stomach (Gastrodynia), of the uterus (Hysteralgia), of the nerves of the face (Ticdoloreux), of the hip (Sciatica), and other neuralgic affections.

NOMENCLATURE.

The naming of diseases according to their nature, origin, seat, or characteristic symptoms; as—Inflammation from heat, Fevers from burning, Dropsies from hydro (water), as hydro-cephalus, &e.

NOSOLOGICAL.

A methodical arrangement of diseases, and their classification into groups. This can only be correctly carried out by a system founded on *Physiology*, the maladies being arranged according to the function concerned.

NUTRITION.

The vital process employed by nature in growth and repair, development and decay, supplying our bodies with new materials and earrying off the old, by the processes of the primary digestion of the food, and the secondary digestion of the tissues themselves.

OBSTETRICS.

The practice of midwifery, and management of women during the period of childbirth.

ŒDEMA.

Local Dropsy. A puffy swollen state of the part which

"pits" or leaves the mark of the finger on pressure. From an effusion of serum in the tissues, as in Œdema of the limbs, feet, and ankles.

ORGANIC.

Relating to organs. A term applied by Pathologists to those diseases traceable to some alteration in the structure of an organ; as Organic disease of the heart, brain, stomach, &c., contra-distinguishing it from functional.

PATHOLOGY.

The science which treats of the nature of disease; as the Pathology of Inflammation, Fever, Dropsy, or other forms of disordered nutrition. The Pathology of the Nervous System, Functional or Structural changes.

PLETHORA.

A fullness or excess of blood, the opposite of a spanæmic or anæmic condition, and often leading to internal congestions.

PHTHISIS.

(Pronounced Thisis.) Pulmonary Consumption, from a deposit of tubercle in the lungs, this giving rise first to irritation and inflammation, or the *incipient* stage, accompanied with cough and slight expectoration, and sooner or later leading to suppuration, and Hectic Fever or Confirmed Phthisis.

PROGNOSTS.

Foreknowledge, or the power of foretelling, according to the symptoms, the natural course and progress of the disease, the amount of danger, or probable chances of recovery.

PYŒMIA.

Suppuration and Putrefaction of the Blood, contaminated with pus from Phlebitis—inflammation or injury of the veins after operations—removal of tumours—injury to the veins of the uterus during labour—Contagion, &c.

RAMOLLISEMENT.

Inflammatory softening of the substance of an organ, as in softening of the brain.

SCROFULA.

A peculiar unhealthy state of the system, pathologically termed the *Tubercular* Cachexia or a Scrofulous habit of body, characterized by—Debility, a languid circulalation, lax habit, and torpid functions, with a tendency to scabs and eruptions, chronic inflammation, swelling and suppuration of the lymphatic glands of the neck, mesenteric glands, rickets, enlargement of the joints, and other phases of scrofulous disease; from the deposit of tubercle in the textures or substance of the different organs, as the lungs in Pulmonary Consumption. A scrofulous habit of body may be hereditary or acquired.

SCROFULOUS MARKS.

As a rule,—fair hair, delicate complexion, blue eyes, long silken lashes, tumid upper lip. In exceptional cases, an anamio-chachectic habit of body, with dark hair and olive-brown complexion. In childhood, a large misshapen head, rather on one side; narrow deformed chest, tumid abdomen.

SECONDARY.

The sequel of some *primary* form of disease; as—a Secondary or Symptomatic Fever, Secondary Syphilis, &c.

SERUM.

The thin or more watery portion of the blood, as distinguished from the solid constituents or clot formed of fibrin and blood cells.

SEROUS.

Relating to Serum, as distinguished from Sanguineous (bloody), as in Serous or Sanguineous Apoplexy, Serous Effusion, &c. [See Membranes.]

SPORADIC.

Attacking a single individual at a time, not spreading like an epidemic, or prevalent among the people.

STRICTURE.

The narrowing or closure of a part, as the œsophagus, rectum (lower bowel), urethra (urinary passage), &c. From inflammation, spasmodic contractions, thickening of the mucous membrane, morbid growths, &c.

STRUCTURAL.

Not Functional. Relating to any alteration in the tissue or substance of the part to which the disease can be traced.

SYMPTOMATIC.

The result of some other morbid condition giving rise to the secondary form of disease, as Symptomatic Fever, Hectic Fever, from suppuration, &c.

THORACIC.

From thorax, the chest. Of or belonging to the chest, as thoracic aneurism, &c.

TRAUMATIC.

The result of a wound, as Traumatic Erysipelas, Fever, Tetanus, Delirium, &c.

TUBERCLE.

The yellow or gray cheesy granular matter exuded from the blood in scrofulous habits to be deposited in the tissues. [See Scrofula.]

UTERINE.

Relating to the *Uterus* or womb, as Uterine Tumours, &c.

VENOUS.

Not arterial, but belonging to the veins, the vessels that convey the "used up" blood back to the heart, hence it is called "Venous Blood."

ZYMOTIC.

Relating to *Epidemic* and *Endemic* diseases, Fevers, Small Pox, Measles, &c., or other contagious disorders whose poison is supposed to excite a kind of *ferment* in the blood.

INDEX.

(The term Medical or Surgical, within the brackets, simply refers to what division of practice the treatment of the case is supposed to belong.)

P.	AGE
Abscess and Suppuration, The Pathelegy and Varieties of	44
Scrofulous, Lumbar, and Psoas. (Surgical.)	45
Apoplexy. See Brain. (Medical.)	35
Asthma. See Respiratory Organs. (Medical.)	37
Atrophy, Definition of. See Structural changes	29
Bladder, Diseases of the. (Medical.)	38
Blood, Diseases of the	40
Spitting of. See Respiratory Organs	36
Vomiting of. See Stemach	37
Blood-vessels, Diseases of the. (Medical.)	36
, (Surgical)	47
Boils and Carbuncles. (Surgical.)	48
Bones, Diseases of the. (Surgical)	46
Bowels, Diseases of the. (Medical.)	37
(Surgical.)	51
Brain, Diseases of the. (Medical.)	35
Breast. (Surgical)	50
Bright's Disease of the Kidney. (Medical.)	38
Bronchitis. See Respiratory Organs. (Medical)	37
Cancer, The Pathology and Varieties of. (Medical and Surgical.)	45
Changes, Structural	29
Chest. (Surgical.)	50
Collapse, Definition of. (Surgical.)	42
Congestion, Definition of	33

	AGE
Different Organs, Diseases of. (Medical.)	35
(Surgical.)	46
Disease, The Definition of	1
Tho Diagnosis of	27
Diseases, General. (Medical.)	41
Disorders, Functional	30
Distinctions, Profossional	8
Doctor, Tho	13
The so-called	5
Dropsy. (Medical.)	34
Fees	19
Fevers, Symptomatic. (Surgical.)	42
Functions, The Three Great	31
Functional Disorders	30
Their Pathology and Causes	31
Gangrene, The Pathology of. See Mortification. (Surgical.)	44
Gullet, Diseases of the. (Medical.)	36
Hæmorrhage. (Medical.)	33
(Surgical.)	43
Head, Wounds of Scalp, &c. (Surgical.)	48
Health, The Definition of	1
Heart, Diseaso of. (Medical.)	36
Hernia. (Surgical.)	51
Hypertrophy, Definition of	29
Inflammation, Varieties of. (Medical.)	33
(Surgical.)	43
Injuries, Physical	28
Intestinal Worms. (Medical.)	37
Joints, Diseases of the. (Surgical.)	46
Kidney, Diseases of tho. (Medical.)	38
— Dropsy of. Renal Dropsy. (Medical.)	34
Liver, Diseases of tho. (Medical.)	38
—— Dropsy of. See Dropsy	34
Medical Cases	33
Mind. Lowness of Spirits. (Medical.)	

\mathbf{P}	AGB
Mortifleation. (Surgical.)	44
Mouth, Diseases of the. (Medical.)	36
(Surgical.)	49
Muscles, Diseases of the. (Medical.)	39
——— (Surgical.)	47
Nock. (Surgical.)	50
Nose. do	49
Nutrition, Physiology and Pathology of	31
Œdema, Definition of. See Dropsy	34
Ovarian Dropsy. See Dropsy. (Medical.)	34
Over-drugging, the Common Practice of	-26
Pancreas, Diseases of the. (Medical.)	38
Paralysis, or Palsy, Varieties of. (Medical.)	40
Phlebitis, Inflammation of the Veins. See Blood Vessols	36
Phlegmasia Dolens, Swollen Leg. Soo Phlebitis	36
Practitioner, The Proper Choice of	2
Respiratory Organs, The Diseases of. (Medical.)	36
Rhoumatism, The Varietics of. (Medical.)	35
Rupture, (Hernia,) Varieties of. (Surgical.)	51
Scrofula. (Medical.)	41
(Surgical.)	45
Scrofulous Diseaso of the Joints. (Surgical.)	46
Scurvy, Varieties of. Seo Skin	39
Sensation, The Nerves of, Diseases of. (Medical.)	35
Skin, Diseases of the. (Medical.)	39
(Surgical.)	47
Spinal Cord, Disoases of. (Medical.)	35
Curvature. See Bones. (Surgical.)	46
Spine. (Surgical.)	51
Spleen, Diseases of tho. (Medical.)	38
Stomach, Diseases of the. (Mcdical.)	37
Strumous Diathesis	41
Sub-Cutaneous Boils, &c. (Surgical.)	48
Suppuration. (Surgical.)	44
Surgical Cases	42

110

P	AGE
Surgical Diseases of Parts or Organs	46
System, Morbid States of the. (Medical.)	33
Titles, Professional	13
Table, Nesological, of Medical and Surgical Cases	33
Throat, Diseases of the. (Medical.)	36
(Surgical.)	49
Varicose Voins. See Blood Vessels. (Surgical.)	47
Ulceration. (Surgical.)	44
Urinary Organs. See Kidney and Bladder. (Medical.)	38
(Surgical.)	52
Abscess. See Suppuration. (Medical.)	44
Uterine Complaints. (Medical.)	42
White-swelling. See Joints. (Surgical.)	46
Whitlow, or Thecal Abscess. See Muscles. (Surgical.)	47
Worms, Varieties of	37

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